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ROLE OF SILICEA GANGLIONIC CYST – A CASE REPORT

Homeopathy

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ABSTRACT

Ganglions are benign, cystic swellings that most commonly affect the hand, especially the dorsal aspect, and have no known etiology. Although these are asymptomatic but may present with symptoms including wrist pain, especially with movement or when a mass is felt, a decrease in range of movement and a decrease of grip strength. They are harmless and non-cancerous growths. Usually, a diagnosis may be made based just on clinical presentation. Homoeopathic treatment can dissolve the cysts effectively without any surgery. This case study shows how individualized homoeopathic therapy may heal ganglion on the back of the hand.

KEYWORDS

Ganglionic cyst, homoeopathy, Silicea, case report,

INTRODUCTION:

A ganglion is a cystic swelling that develops when the joint capsule, tendon sheath, or synovial sheath myxomatously degenerates. It has a gelatinous fluid in it. The dorsum of the wrist (close to the scapholunate articulation), the flexor aspect of the wrist, and the ankle joint are the usual locations of occurrence.[1] It typically manifests as a round-to-oval swelling with smooth edges and round surfaces on the dorsum of the hand, and it affects people primarily between the ages of 20 and 50. Skin that covers the edema is typical. The swelling is fluctuating and tensely cystic. Transillumination is a transversely mobile, negative light source. When a tendon is constricted against resistance, its mobility is limited. The joint space is unrelated to the ganglion. most ganglion cases are asymptomatic but, in some cases, there will be tenderness, weakness etc[1]. Treating an asymptomatic ganglion is not necessary. The ganglion's size may be decreased by sclerosant injection and ganglion aspiration[1]. A cyst that has ruptured as a result of trauma can occasionally be permanently cured. Surgery is an option, but the likelihood of recurrence is high[2].

Homoeopathic Approach In Ganglionic Cyst

The condition known as a ganglionic cyst is brought on by the cystic degeneration of the tendon sheath's connective tissue. This leads to synovial fluid leaking through the joint capsule and the formation of tiny islets of microspaces in the synovial sheath that combine to form ganglions[2]. It is difficult to cure the condition with therapeutically indicated medicine alone. It does resolve the visible cyst to a non-palpable level but recurrence may occur. To remove from the roots a deep-acting constitutional medicine is required.

Homoeopathy may thus be beneficial in such circumstances where all other treatments are insufficient. Still, very few numbers of studies on wrist ganglion have been published in homoeopathic medical journals. Three wrist ganglion cases were found in a case series, where individualized homoeopathic treatments had successful outcomes in all three cases [6]. Another study included a case report of a bilateral dorsal wrist ganglion that was successfully treated with homoeopathy [7]. Various Homoeopathic medicines such as Calcarea carb, Ruta, Calcarea flour, heparsulph, Silicea, Sulphur, and others may be effective in the treatment of wrist ganglion [8].

Action Of Silicea

One of our first lines of treatment for inflammation that results in suppuration is silica. Whether the suppuration occurs in soft or hard parts doesn't seem to matter much. Tendons and ligaments are examples of cellular tissues with deep-seated suppurations that fall within the realm of its healing process.[13]

Silicea is the most important remedy in materia medica having marvelous action on bones, and fibrous tissues. it produces suppuration and destruction of bones, periosteum and fibrous tissues in the body. It is also effective in cases of caries of the body or epiphyses of any bones. Both old indurated tumours and recurrent fibroids have been cured by it.[14]

Case Report

A 58-year-old woman arrived complaining of swelling that had been there for five months on the back of her right hand and was getting bigger over time. Slight discomfort or pain was felt in the affected hand, especially on exertion. No history of trauma. Consulted allopathy who recommended surgical management. She was also complaining of a headache worse by cold air. There was a cold sensation in the feet, wanting to cover, tendency to catch cold easily. Desire warm food, aversion to meat, profuse sweating on soles, history of hair fall, scaly dandruff with itching of the scalp.

She has been taking allopathic medicines for hypertension for 5 years. No significant family or past history reached the menopause. She has an afebrile blood pressure (BP) of 120/70 mm Hg, a 76-bpm pulse, and a breathing rate of 18/minute.

There was no pallor, no icterus, no cyanosis, no clubbing, no pedal oedema, no lymphadenopathy.

Upon examination, the right hand's dorsum revealed a smooth, soft cystic growth that was slightly movable on the sides. Pressure did not cause the swelling to adhere to the skin. No warmth or erythema was noted. No other systemic abnormalities were found on clinical examination.

Diagnosis

Based on the patient's history and clinical presentation, ganglion was the diagnosis made in this case. The diagnosis is classified as a ganglion or ganglionic cyst under ICD-11 specific code FB42, which is found under the musculoskeletal system chapter.

Case Analysis

Case totality was constructed after a thorough case taking the symptoms taken for repertorization is given below.
Chilly patient
desire warm food
Aversion meat
Ganglionic cyst
Headache, forehead worse by cold, better by warmth
More sweat on soles
Wants to cover their feet
Hair fall, dandruff, scaly with itching

In this instance, repertorization was done using Synthesis Repertory and the software RADAR 10.0 [10]. Following repertorization, Silicea (20/9), Calcarea carb (17/8), ars alb (18/7), lycopodium (16/7), and phosphorus (15/7) were the top-ranked medications.

[Figure 1: Repertorial analysis].

Even though abnormal growth is a combination of sycotic and tubercular miasms, smoothness of the skin favours mostly tubercular miasm.

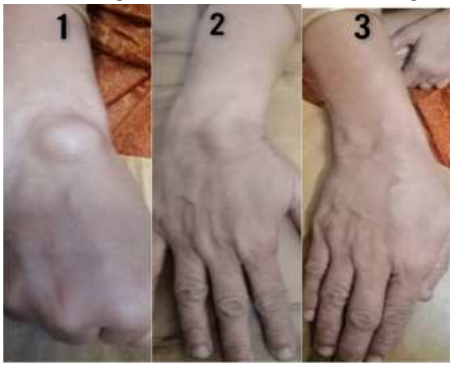
Table 1: Analysis and Evaluation

Characteristic Mental Generals	I. affectionate
Characteristic Physical Generals	I. Chilly patient ii. Desire warm food iii. Aversion meat iv. Sweat profuse on soles
Particulars	I. Ganglionic cyst on the back of the right hand ii. Headache worse cold air, better warmth iii. Cold sensation in feet, want to cover iv. Hairfall, dandruff scaly with itching

Therapeutic Intervention And Follow-up

Following a thorough analysis of the reportorial entirety, Silicea was determined to be the specific homoeopathic remedy in this instance.

Baseline prescription: After a single dosage of Silicea 200 for 30 days, a placebo was administered. A regular, healthy diet and refraining from strenuous exercise are recommended. Follow-ups were conducted every month. The patient responded well to the first prescription; her wrist swelling gradually decreased, and her other complaints significantly improved as well. The swelling is not palpable now. The patient was still under placebo and there were no new complaints.



[Picture 1: Before and after picture of the cyst].

Table 2 follow up:

Date	Observation	Prescription
First Visit (12/01/2023)	Baseline symptoms (presented subjective and objective symptoms/signs)	Silicea 200/1 dose Placebo 30/1-2 glob. OD x 30 days
Second visit (10/02/2023)	The size of the swelling reduced Headache- intensity reduced Dandruff-itching still persists Hairfall- still persists	Silicea 200/ 1 dose Placebo 30/1-2 glob. OD x 30 days
Third visit (14/03/2023)	Size of swelling –markedly reduced. No pain or discomfort on exertion Headache- feel better Hairfall-reduced	Placebo 30/ 1-2 glob. OD x 30 days
Fourth visit (11/05/2023)	Size of swelling- not visible mild enlargement on palpation Headache-no headache reported Hairfall- better	Silicea 200/1 dose Placebo 30/ 1-2 glob. OD x 30 days
Fifth visit (26/06/2023)	No swelling. The patient was feeling better overall, and no new complaints were reported.	Placebo 30/ 1-2 glob. OD x 30 days

DISCUSSION

Ganglions are benign cystic swellings that are three times more frequent in women than in men and are typically seen in the wrist [8]. Few previous studies show some promising results in ganglion treatment with homoeopathy [6, 7]. Many homoeopathic medicines are indicative of ganglion cysts [8] but the selection of medicine relies on the patient's individuality. In this instance, a case totality was created following a thorough case-taking, analysis, and symptom evaluation. There were a few medicines suggested after consultation with the repertory, however, the majority of the indicated one (silicea200) was chosen based on the combination of all symptoms. The clinical presentation had been carefully evaluated during follow-up visits, and prescriptions were issued in accordance with the findings. After taking the initial prescription, the patient showed great response, and the swelling in her wrists went down in two to three months. Her other complaints also showed a noticeable improvement. The treatment was continued for 6 months. The patient was typically improved at the end of the treatment and no new complaints had been made. She has not experienced any recurrence of her previous complaints as of yet.

CONCLUSION

This case illustrates the effectiveness of a customized homoeopathic remedy for dorsal wrist ganglions. A study with a larger sample will definitely prove the efficacy of homoeopathic treatment in ganglion cases.

Conflict Of Interest

None

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Not available

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