AN EVIDENCE BASED CASE STUDY ON LEUKOPLAKIA- A PRE-CANCEROUS STATE THROUGH STANDARDISATION IN PRESCRIBING

Abstract

Discussion has been unfurled on various facets of Leucoplakia- a precancerous state. Along with that a model case study has been presented. Proper case taking has been done followed by analysis of the symptom, conceptual image, synthesis, evaluation/repertorial totality, nosological diagnosis, miasmatic diagnosis, repertorisation have been done where standardization in Homoeopathic prescribing is being reflected. The case is an evidence base case study as the cytological study showing moderate dysplasia found at the onset of treatment and at the end of the treatment there was no dysplasia along with before, during and after video and photographs have been given.

<u>Keywords</u>:- Leucoplakia – a precancerous state , dysplasia, analysis of symptoms, conceptual image, synthesis, repertorial totality.

INTRODUCTION

Leukoplakia in the mouth (**oral leukoplakia**), is defined as "a predominantly white lesion of the <u>oral mucosa</u> that cannot be characterized as any other definable lesion" some oral leucoplakia will transform into cancer. Leukoplakia could be classified as mucosal disease, and also as a premalignant condition. ^[1]

The prevalence of this lesion in Ernakulum district (Kerla,India) was 17 per 1000; it was highest(61 per 1000 among people with mixed habits. The annual age adjusted incidence rate was 2.1 per 1000 among men and 1.3 per 1000 among women; the highest incidence (6.0 per 1000) was among men who both chewed and smoked. In an adult Swadish population a 3.6% prevalence rate was recorded (Anell T,1976). Almost all leucoplakia in India occur in tobacco users.

A definite dose response relationship between leucoplakia and various forms of tobacco use in this area has been demonstrated. The dose response relationship was stronger for the smoking habit than for the chewing habit and remained significant after talking account of age, gender, and type of tobacco habit. ^[1]

The onset of leucoplakia usually takes place after the age of 30 years resulting in a peak incidence above the age of 50 years.^[1]

The gender distribution in most studies varies, ranging from a strong male predominance in different parts in India, to almost 1:1 in the western world.^[2]

<u>Causes are described as follows</u>: Tobacco, rough teeth, alcohol, sanguinaria, candida albicans, UV radiation, trauma, epithelial atrophy, carcinogenic nitrosamine, nitrosobenzyl methylamise, human papilloma virus strain 16,18, tumour suppressor gene p53 ^[1] ^[3] ^[4] ^[5]

A proposal for modified classification and staging system for oral leucoplakia has been presented by Van der Wall et al, 2000 in which the size of the leucoplakia and the presence or absence of epithelial dysplasia are taken into account

- 1 L₁- Size of leucoplakia < 2
- 2 L₂- Size of leucoplakia 2-4cm
- 3 L_3 Size of leucoplakia > 4cm
- 4 Lx-Size not specified
- 5 P-Pathology
- 6 P₀-No epithelial dysplasia
- 7 P₁-Distinct epithelial dysplasia
- 8 Px-Dysplasia not specified in the pathology report.

Staging of oral leucoplakia

Altogether 4 stages are recognized.

- Stage I –L₁P₀
- Stage II L₂ P₀
- Stage III $L_3 P_0 OR L_1 L_2 P_1$
- Stage $IV L_3 P_1^{[1]}$
- Most cases of leukoplakia cause no symptoms,^[6] but infrequently there may be discomfort or pain.^[7]The exact appearance of the lesion is variable. The size can range from a small area to much larger lesions.^[8] The most common sites affected are the buccal mucosa, the labial mucosa and the <u>alveolar mucosa</u>,^[9] although any mucosal surface in the mouth may be involved.^[7] The clinical appearance, including the surface texture and color, may be homogenous or non-homogenous. Some signs are generally associated with a higher risk of malignant transformation.
- Leukoplakia may appear as white or grayish in patches that can't be wiped away.Irregular or flat-textured ,thickened or hardened in areas,along with raised, red lesions (erythroplakia), which are more likely to show precancerous changes.^[10]

The hallmark of Histopathological aspects of leucoplakia are epithelial hyperplasia and surface hyperkeratosis.Epithelial dysplasia, if present may range from mild to severe.

Histo-pathological features of epithelial dysplasia

Loss of polarity of the basal cells, Presence of more than one layer of cells having a basaloid appearance, Increased nuclear cytoplasmic ratio, Drop-shaped rete processes, Irregular epithelial stratification, Increased no. of mitotic figures(a few abnormal mitoses may be present), Presence of mitotic figures in the superficial half of the epithelium, Cellular

phenomorphism ,Nuclear hyperchromatism, Enlarged nucleoli, Reduction of cellular cohesion, Keratinisation of single cells or cell groups in the prickle layer.^[1]

Investigation Vit- A,B₁₂,C, Beta-carotene, folic acid, biopsy, brush biopsy/exfoliated cytology, elimination of possible cause^[1]

Many cases of leukoplakia can be prevented with behavioral changes.

- Stop smoking or chewing tobacco
- Reduce alcohol use
- Eat antioxidant-rich foods. Antioxidants can help deactivate irritants that may cause patches. Antioxidant-rich foods include spinach, pumpkin, and carrots.
- if leukoplakia is caused by a rough <u>tooth</u> or an irregular surface on a denture or a filling, the <u>tooth</u> will be smoothed and dental appliances repaired ^[11]

CASE STUDY ON LEUCOPLAKIA

PRESENT COMPLAINTS :-

1.Mr D.C.Roy of age 73yrs came to us on 12-09-2009 with white patches on tongue and red streaks. Complaint was there since 2 years. There was burning pain on taking spices, chillies ,warm foods & drinks, relieved by cold application, associated with salivation and tongue was looking flabby.

Stool with mucus and tenesmus since last 1yr.Passes stool two to three times at night.
 Right sided inguinal hernia since 20yrs.

Treatment history:- Allopathic, Homoeopathic, & Ayurbedic : But there was no relief. Past history of Hemorrhoids cured with Homoeopathic medicines.

Family history of Father-Hypertension, Mother-Bronchial asthma

Personal history-Retired person, widower, non-vegetarian

Physical generals-<u>Hot patient</u>, <u>easily catches cold</u>, <u>desire for warm food</u>, <u>sweet</u>, <u>salt</u>, <u>aversion</u> <u>to sour,intolerance to bread</u>. <u>Sweat profuse/offensive</u>. <u>Appetite diminished/easy satiety</u>. <u>Thirst profuse with moist tongue</u>. <u>Stool with mucus and tenesmus</u>. <u>Wound heals late</u>. <u>Salivation during sleep</u>.

Mind:- <u>Sympathetic</u>, consolation desire for, <u>fear of thunderstorm</u>, <u>music aversion to</u>, <u>religious</u> <u>minded</u>.

Physical examination:- B.P.-150/88 mm of Hg, Wt-75 kg, Pulse-78/min, Respiration-18/min Neck/submandibular gland-NAD

Abdomen-NAD, Chest-NAD, Hernia : Ingunial (rt)

Lab. Finding- Squamous cell carcinoma tounge



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DEPERTMENT OF PATHOLOGY

Regd no :VMOPD60056	Date:12/09/2009	TIME:08:22
NAME: DINESH CHROY	AGE:068	SEX:MALE
REF. BY: DR.NIRANJAN MOHANTY	P.TYPE:OUTDOOR	Bed NO: /

CYICLOGY REPORT

COMPLAIN OF: -White patch with red streaks ON EXAMINATION: Tongue is inflamed there vwhite patches with red streaks CYTOLOGY FINDINGS: (1) Plenty of mature squamous epithelial cell with pyknotic nucleus and abundant eosinophilic cytoplasm. (2)Some cells shwoing anisonucleosis with irregular nuclear margins , prominent nuclei. (3)Good number of neutrophilic infiltration also noted.

IMPRESSION: -Leucoplakia with moderate dysplasia

Dr.Sima chauhan, MD(pathology)

Dr.T C De, MD(pathology)

(THIS REPORT IS NOT VALID FOR MEDICOLEGAL PURPOSE)

ANALYSIS OF SYMPTOMS:

LOCATIONS	SENSATIONS/PATH	MODALITIES	CONCOMITANTS
1-Tongue	Burning	< warm Food/drink	salivation
		Spices	
2Tongue	white patches with red streaks	X	x
3.Skin inguinal	Dry eruption(Tinea cruris)	X	x
4.Rectum	stool with mucus	<night< td=""><td>tenesmus</td></night<>	tenesmus
5.Skin inguinal	itching	<warm>cold</warm>	X
6.Inguinal (Rt)	Hernia	Х	X

CONCEPTUAL IMAGE

1)Unexpected deviation:- Hot pt. desires for warm food 2)Causation:-XXX 3) GENERAL:-

MENTAL	PHYSICAL GENERAL	PATHOLOGICAL GENERALS
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Sympathetic, Consolation >	Hot pt , easily catches cold	Squamous cell carcinoma
,Music aversion, Fear of	Desire: Sweet, Salt, warm food	Rt. inguinal hernia
thunderstorm, Religious minded	Aversion:- <u>Sour,</u>	
°	Intolerance:-bread	
	Appetite:- <u>Diminished/easy</u> s <u>atiety</u>	
	Thirst:- profuse with MT	
	Stool:- mucus with tenesmus	
	Urine: N	
	Sweat:- <u>Profuse/offensive</u>	
	Salivation:- During sleep	
	Sleep:-N	
	Dream:-N.S	
	Wound <u>healing:-Late</u>	

CHARACTERISTIC PARTICULARS: - White patches with red streaks & burning sensation on tongue<warm food, drinks with salivation, stool with mucus with tenesmus<night

PARTICULARS:-Right inguinal hernia, Dry eruptions in inguinal region with itching<warm&>by cold (Tinea cruris)

SYNTHESIS OF THE CASE: Following symptoms are excluded due to the less magnitude of the symptoms, normal expressions & symptoms pertaining absolute surgical.

Consolation >,religious mind, urine normal, sleep normal, dream normal. Rt. inguinal hernia, So the synthesis of the case is written as follows:-

1)Unexpected deviation:-

Hot pt. desires for warm food

2)Causation:-XXX

3)Mental general:-Sympathetic, ,Music aversion, Fear of thunderstorm,

Physical general: Hot pt , easily catches cold

Desire: sweet, salt, warm food , Aversion:-sour, Appetite:-diminished/easy satiety Thirst:- profuse with moist tongue ,Stool:- mucus with tenesmus, Sweat:-profuse/offensive , Salivation:- during sleep ,

Wound healing:-late.

Pathological generals: squamous cell carcinoma of tongue

Characteristic particular:-

White patches with red streaks & burning sensation on tongue <warm food, drinks with salivation. Stool with mucus with tenesmus<night

Particular:-Itching, groin <night, warm, Tinea cruris

EVALUATION OF SYMPTOMS/TOTALITY OF SYMPTOMS^[12] : In

this above cases mental generals are predominant .So we evaluate the case according to Kent's method of evaluation.

So the evaluation of symptoms are as follows

1.Hot pt , desire warm food

2.Thirst profuse with moist tongue

3.Music aversion,
4.Fear of thunderstorm,
5.Sympathetic,
6.Easily catches cold
7.Desire: sweet,
8. Desire salt,
9.Aversion:-sour,
10.Appetite:-diminished/easy satiety
11. Stool:- mucus with tenesmus
12. Sweat:-profuse/offensive
13.Salivation:- during sleep
14.Wound healing:-late

14. Woulid Healing.-late

15. Squamous cell carcinoma tongue.

16. White patches with red streaks & burning sensation on tongue <warm food, drinks with salivation.

17. Itching inguinal region <night, warm

18.Tinea cruris

MIASMATIC DIAGNOSIS^[13]

SL NO	SYMPTOMS	PSORA	SYPHILIS	SYCOSIS
1	Thirst: profuse with Moist tongue			
2	Music aversion			
3	Fear of thunderstorm			
4	Sympathetic			
5	Hot pt :easily catches			
6	Desire Salt			
7	Desire warm food, sweet			
8	Aversion:-Sour			
9	Appetite: diminished/easy satiety			
10	Stool:- mucus with tenesmus			
11	Sweat:-profuse/offensive			
12	Salivation:- during sleep			
13	Wound healing: Late			
14	Squamous cell carcinoma			
15	White patches with red streaks & burning sensation on tongue <warm drinks<br="" food,="">with salivation.</warm>			
16	Itching Tinea cruris <night, td="" warm<=""><td></td><td></td><td></td></night,>			

CONCLUSION:-

Hence it is a Mixed miasmatic case of Predominance of Syphilitic miasm.

NOSOLOGICAL DIAGNOSIS

White patches with red streaks & burning sensation on tongue <warm food, drinks with salivation. Stool with mucus with tenesmus<night

Biopsy report -- Squamous cell carcinoma tongue.

Rt. inguinal hernia

Tinea cruris

REPERTORISATION^[14]



REPERTORIAL RESULTS

Merc sol:-17/32
 Phos:-16/32
 Sul.:-16/32
 Sul.:-16/32
 Nit acid:-14/29
 Lyco:-14/28
 Arsenic:-13/26
 Silicea:-14/25
 Sepia;-15/24

PRESCRIPTION (12-9-2009)

Rx

Merc. Sol -0/1,0/2,0/3,0/4

BASIS OF PRESCRIPTION

<u>1.Hot pt</u>, desire warm food

2.Thirst profuse with moist tongue

3. Music aversion,

4.Fear of thunderstorm,

5. Easily catches cold

6.Desire: s<u>weet</u>,

7. Desire <u>salt,</u>

8.Appetite:-diminished/easy satiety

9. Stool:- mucus with tenesmus

10. Sweat:-profuse/offensive

11.Salivation:- during sleep

12.Wound healing:-late

13. Squamous cell carcinoma tongue.

14. White patches with red streaks & burning sensation on tongue <warm food, drinks with salivation.

15. Itching inguinal region <night, warm Tinea cruris

FOLLOW UP ON (16-10-2009)

- White patches on tongue with red streaks with burning pain on taking spices, chillies, and warm food and drinks(unchanged).
- Stool with mucous was 2to 3 times a day at night increased to 3 to 4 times.
- Dry eruption with itching 1st 15day there was aggravation & then it has reduced to 50%.
- Salivation (unchanged).
- Other F/H-NormalImpression-1st there was aggravation of few symptoms and followed by amelioration.

Impression - improving.

Rx

• Merc. Sol -0/5,0/6,0/7,0/8 (2oz 16doses bd)

Follow up (20/11/2009)

- White patches with red streaks(unchanged) but burning to different food has reduced to 25%.
- Stool with mucous and tenesmus has reduced but frequency is 2/3 times a day.
- Dry eruption with itching has reduced 50%.
- Salivation(unchanged).
- Other F/H are normal

• Impression-improving.

Rx

• Merc. Sol -0/9,0/10,0/11,0/12 (2oz 16doses bd)

Follow up (25/12/2009)

- Tongue White patches with red streaks has no improvement.
- Burning tongue has reduced 60%.
- Stool with mucous and tenesmus has reduced 60% with one stool at night.
- Dry eruption with itching reduced 75%.
- Salivation is continuing.

Other F/H are normal.

Impression - improving.

Rx

• Merc. Sol -0/13,0/14,0/15,0/16(2oz 16doses bd)

Followup (29/01/2010)

- Tongue White patches with red streaks have reduced 20%.and Burning tongue unchanged
- Salivation standstill.
- Tendency to take cold unchanged.
- Sweat: normal
- Appetite diminished with easy satiety unchanged.
- Stool with mucous without tenesmus reduced 90%
- Thirst: N
- Urine: N

Impression-improving

Rx

Merc. Sol -0/17,0/18,0/19,0/20 (2oz 16doses bd) Follow up (29/02/2010)

- Tongue White patches with red streaks have reduced 30%.and Burning tongue unchanged
- Salivation standstill.
- Tendency to take cold unchanged.
- Sweat: normal
- Appetite diminished with easy satiety unchanged.
- Stool with mucous without tenesmus reduced 90%

- Thirst: N
- Urine: N

Impression-improving

Rx

Merc. Sol -0/21,0/22,0/23,0/24 (2oz 16doses bd) Follow up (29/03/2010)

- Tongue White patches with red streaks has no improvement.
- Burning tongue unchanged.
- Stool with mucous without tenesmus but it is 2/3 times at early morning.
- Dry eruption standstill there is itching violently which was having warm aggravation and ameliorated by cold application.
- He developed burning palm.
- Appetite increased
- Other F/H are normal.
- Impression-standstill & there is new symptoms so it was restudied.
- Hence totality was rebuilt which was as follows:
- 1- white patches on tongue
- 2- burning and smarting pain on tongue
- 3- dysentery
- 4- eruptions ,dry
- 5- itching aggravation by warm
- 6- burning palm
- 7- appetite increased

There after, repertorisation was done which was as follows:

New totality

- Fear of thunderstorm
- Music aversion
- Sympathetic
- Religious minded
- Hot patient
- Desire-sweet,salt
- Aversion-sour
- Appetite increased
- Thirst(++) with moist tongue
- Wound healing-late

- Sweat:-profuse/offensive
- White patches with red streaks on tongue with burning.
- Salivation from mouth.
- Stool with mucous< early morning
- Dry eruption with itching. Itching aggravated by warm & ameliorated by cold.

REPERTORISATION^[14]

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	Totality	35	33	32	31	30	28	28	26	26	25	24	24	23 22
	Symptom Covered	16	16	18	16	16	16	15	17	16	13	13	12	13 13
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👔 Repertorisation								`					≜ att	10:03 AM 10/24/2015

By repertorisation following drugs were in the panel they were as such:

- - SULPH.:35/16
- NIT.ACID:33/16
- MERC.SOL:32/18
- PHOS.:31/16
- LYCO. 30/16
- Sulphur selected because it is antipsoric remedy because of the following symptoms

BASIS OF PRESCRIPTION

• Fear of thunderstorm

- Religious minded
- Hot patient
- Desire-sweet, salt
- Aversion-sour
- Sweat:-profuse/offensive
- Thirst(++) with moist tongue
- Wound healing-late
- Appetite increased
- White patches with red streaks on tongue with burning.
- Salivation from mouth.
- Stool with mucous< early morning
- Dry eruption with itching. Itching aggravated by warm & ameliorated by cold.

Rx Sulphur 0/1,0/2,1/3,0/4 (2oz,16doses,b.d.)

Follow up(02/05/10)

- white patches on tongue improove10%
- burning and smarting pain on tongue
- dysentery slightly better
- eruptions ,dry unchanged
- itching aggravation by warm improved20%
- burning palm improved 20%
- appetite increased as before

Impression- improving

Rx

Sulphur-0/5,0/6,0/7,0/8 (2oz,16doses,b.d.) Followup (08/06/10)

- white patches on tongue improove20%
- burning and smarting pain on tongue unchanged
- dysentery slightly better
- eruptions ,dry better30%
- itching aggravation by warm improved50%
- burning palm improved 60%
- appetite normal

Impression-Improving

Rx

Sulphur-0/9,0/10,0/11,0/12 (2oz,16doses,b.d.)

Followup (14/07/10)

- white patches on tongue improove30%
- burning and smarting pain on tongue unchanged
- dysentery slightly better
- eruptions ,dry better40%
- itching aggravation by warm improved60%
- burning palm improved 70%

Impression-Improving

Rx

Sulphur-0/13,0/14,0/15,0/16 (2oz,16doses,b.d.)

Followup (22/08/10)

- white patches on tongue improove30%
- burning and smarting pain on tongue unchanged
- dysentery slightly better
- eruptions ,dry better40%
- itching aggravation by warm improved60%
- burning palm improved 70%

Impression- Improving

Rx

Sulphur-0/17,0/18,0/19,0/20 (2oz,16doses,b.d.)

Followup (28/09/10)

- white patches on tongue improove40%
- burning and smarting pain on tongue unchanged
- dysentery slightly better
- eruptions ,dry better50%
- itching aggravation by warm improved70%
- burning palm improved 75%

Impression-Improving

Rx

Sulphur-0/21,0/22,0/23,0/24 (2oz,16doses,b.d.)

Follow up (02/10/10)

- white patches on tongue improove60%
- burning and smarting pain on tongue improove 30%
- no dysentery
- eruptions ,dry better60%
- itching aggravation by warm improved80%
- burning palm improved 75%

Impression-Improving

Rx Sulphur-0/25,0/26,0/27,0/28 (2oz,16doses,b.d.)

Follow up (04/11/10)

- white patches on tongue improove70%
- burning and smarting pain on tongue improove 30%
- eruptions ,dry better65%
- itching aggravation by warm improved75%
- burning palm improved 80%

Impression- Improving

Rx

Sulphur-0/29,0/30,0/31,0/32

(2oz,16doses,b.d.)

Follow up (13/12/10)

- white patches on tongue improove70%(STAND STILL)
- burning and smarting pain on tongue improved 30% (STAND STILL)
- eruptions ,dry better65% (STAND STILL)
- itching aggravation by warm improved80%
- burning palm improved 90%

Impression- Improving

Rx

Sulphur-0/33,0/34,0/35,0/36 (2oz,16doses,b.d.)

Follow up (15/01/2011)

- white patches on tongue improove70%(STAND STILL)
- Burning and smarting pain on tongue improove 30% (STAND STILL)
- Tongue White patches with redness & salivation
- He develop frequent urging for urination
- Pain urethra at the end of urination
- Sudden urging for urination
- Fascitis (b/l)

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- Appetite: increased
- Thirst:increased
- Chilly pt., easily catches cold
- Extremities coldness
 - Impression- Not Improving few new symptoms appeared

Hence totality was rebuilt & repertorized which was as follows:

REPERTORISATION^[14] 🌉 Hompath Classic - [Repertorisation] 🔜 Patient Repertory Search Extract MatMed Edit View Utilities Hompath Family W 14 🥺 🗲 🔄 🏝 🖭 🕮 🕰 🍳 🕲 🛄 🐂 🛍 🛍 🖉 礼 🚄 🗙 📍 Context CHANDRA ROY Reg. No. : 321 Visit Date : 26/01/2016 🗉 🔸 🔕 🙆 🕸 iix 0 0 2 10 culph Ars ahus.1 Acon 150 phac cale phos Totality Symptom Co 10 11 [C] [Mouth]Discoloration:White:Tongue: 3 3 3 2 2 2 2 2 2 [C] [Mouth]Pain/Burning, raw, smarting/Tongue 2 1 1 [C] [Mouth]Discoloration Redness:Tongue: 2 2 3 3 [C] [Bladder]Urination:Frequent 3 [C] [Bladder]Urging to urinate, morbid desire:Sudden 2 2 а 1 з 2 1 з [C] [Urethra]Pain Burning Urination Agg. Close, at 1 [C] [Extremity Pain]Drawing:FootHeel: jH 1 1 1 [C] [Stomach]AppetiteIncreased, hunger in general: 3 3 3 3 3 2 2 3 1 3 2 3 [C] [Stomach]Thirst: 3 2 3 3 1 2 2 1 3 [C] [Generalities]Heat:Vital, lack of: 3 2 3 3 2 3 [C] [Generalities]Cold/Tendency to take, taking cold agg .: 3 3 2 • 1 • 12 Symptoms Remedies 542 💁 🗞 📴 🖓 😵 💠 🗰 🛺 🔍 🚛 🖉 🍕 🖓 👘 📋 ⋵ 🔮 🧿 o 🖉 🔜 ▲ ▲ ► € 6:23 PM 1/26/2016

REPERTOIAL RESULTS: Merc.sol.:27/12 Cal.carb.:27/10 Sul.:25/11 Ars.alb.:25/10 PRESCRIPTION

Rx

Cal.carb.1M(2gls. dissolve in 1oz of distilled water,4doses,6hourly} Followed by Merc .sol.0/25,0/26,0/27,0/28)from 3rd day

(2oz.16dose bd)

Follow up (015/02/2011)

- white patches on tongue better 40%
- Burning and smarting pain on tongue better70%
- Tongue White patches with redness & salivation better 80%
- Frequent urging for urination better 50%
- Pain urethra at the end of urination better60%
- Sudden urging for urination better
- Fascitis (b/l) bette 50%
- Appetite: increased
- Thirst: increased
- Chilly pt. cont.
- Easily catches cold slightly better
- Extremities coldness is slightly better

Impression- improving

Rx

Merc .sol. 0/29,0/30,0/31,0/32 (2oz,16dose o.d.)

Follow up (017/04/2011)

- white patches on tongue better 60%
- Burning and smarting pain on tongue better 70%
- Tongue White patches with redness & salivation better 90%
- He develop frequent urging for urination better
- Pain urethra at the end of urination better
- Sudden urging for urination better
- Fascitis (b/l) better
- Appetite: increased
- Thirst: increased
- Ambithermic

- Easily catches cold is better
- Extremities coldness is better

Impression-Improving

Rx

Merc .sol. 0/33,0/34,0/35,0/36 (2oz.16dose o.d.)

Follow up (019/06/2011)

- white patches on tongue better 80%
- Burning and smarting pain on tongue better 90%
- Tongue White patches with redness & salivation better 95%
- He develop frequent urging for urination better
- Pain urethra at the end of urination better
- Sudden urging for urination better
- Fascitis (b/l) better
- Appetite: increased
- Thirst: increased
- Ambithermic
- Easily catches cold is better
- Extremities coldness is better

Impression- Improving

Rx

Merc .sol.0/37/38,0/39,0/40 (2oz.16dose o.d.)

Follow up (07/09/2011)

- No white patches on tongue
- No burning and smarting pain on tongue
- No tongue White patches with redness & salivation
- No he develop frequent urging for urination
- No pain urethra at the end of urination
- No Sudden urging for urination
- Fascitis (b/l)reduced
- Appetite: n
- Thirst: n
- Ambithermic and does not catch cold readily.
- Extremities coldness better



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DEPERTMENT OF PATHOLOGY

Regd no : VMOPD60098 NAME: DINESH CH. ROY REF.BY:DR.NIRANJAN MOHANTY Date: 29/11/2011 AGE:70 P.TYPE:OUTDOOR TIME: 10:30 SEX: H/M Bed NO: /

CYTOLOGY REPORT

FOLLOW UP: -No complain of white patches or red streaks on tongue

ON EXAMINATION: No inflammation of tongue No white patch No red streak

CYTOLOGY FINDINGS: -Nomal cells

IMPRESSION: -Normal tongue

Dr.Sima chauhan, MD(pathology)

Dr.T C De,MD(pathology)

(THIS REPORT IS NOT VALID FOR MEDICOLEGAL PURPOSE)

CONCLUSION-

- 1. During Hahnemann's time the ideas and principle of standardization was a trial brazier of this time considering the technological limitation. Technology has advanced astronomically hence the standardization in Homoeopathy is possible which has been shown in this particular case.
- 2. Chronic intractable dreaded disease like Leucoplakia a pre-cancerous state can be completely cured with Homoeopathic medicament.
- 3. It gives a defeating reply to our critics that , Homoeopathy removes the symptoms but the disease remains of Hufeland Journal.^[15]

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