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Evidence -Based Case Report On Cellulitis Treated With Homeopathic Dilutions

DR. LAGNAJITA RAAVI.MD(HOM), HOD, PG GUIDE

DEPT OF ORGANON OF MEDICINE & HOMOEOPATHIC PHILOSOPHY
HAMSA HOMEOPATHY MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE

DR. CHINTADA PRAVALLIKA MD PART 1

DEPT OF ORGANON OF MEDICINE & HOMEOPATHIC PHILOSOPHY
HAMSA HOMEOPATHY MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE

Abstract: Cellulitis is a prevalent bacterial skin infection with diffuse swelling, brawny edema. It primarily affects middle-aged and older adults, with no significant difference in incidence between men and women. A 65-year-old man with symptoms such as burning, edema, sensitivity to touch, and discomfort experienced a repertorial investigation and was prescribed Apis Mellifica 200CH. After taking the homeopathic medication, he began to recover, showing improvements in his mental state, reduced swelling, and sensitivity.

Keywords: Cellulitis, Edema, Swelling, Homoeopathy.

INTRODUCTION: Cellulitis is a bacterial infection of skin and subcutaneous tissue, often associated with broken skin or pre-existing ulceration. It is characterized by painful, erythematous, oedematous tissue, fever, malaise, and leucocytosis. Common causative organisms include *Streptococcus pyogenes* and *S. aureus*. Blood and skin cultures for sensitivity should be taken before administering antibiotics and elevating the affected extremity. Cellulitis is non-suppurative and invasive, often related to the point of injury, and can cause tissue destruction, gangrene, and ulceration.

Epidemiology: Cellulitis is a skin infection that can affect affecting over 14 million people annually. It can lead to multiple episodes or recurrences. A study investigated risk factors affecting cellulitis episodes and the association between cancer types and cellulitis episodes using a two-part count regression model. Results showed that significant factors affecting cellulitis episodes included cellulitis history, clinical stage of cancer, no cancer, cancer of female reproductive organs, breast cancer, and age ≥ 60 years. Cancer types, age, and cellulitis history were more likely to link to excess zero cellulitis or one cellulitis episode.

PATHOGENESIS: Bacteria can access the epidermis through skin breaks, either accidental or iatrogenic. The expanding area of erythema may be due to extracellular toxins or the host's immune response. Etiologic causes include commensal flora like *S. aureus* and *S. pyogenes* and a variety of exogenous flora.

CLINICAL FEATURES: An elderly patient presents with diffuse swelling, brawny edema, difficulty swallowing due to mouth floor edema, high fever, toxicity signs, and putrid halitosis, characterized by oedema pushing the tongue upwards and causing difficulty swallowing.

DIFFERENTIAL DIAGNOSIS includes Deep vein thrombosis, Varicose eczema, Lipodermatosclerosis, chronic inflammation secondary to lymphoedema/chronic edema, and drug eruption.

INVESTIGATION Cellulitis can be clinically diagnosed through signs and symptoms. Various investigations including vital signs, full blood count, C-reactive protein (CRP), CBP, swabs, and mycology.

CASE REPORT:

PRESENTING COMPLAINT:

A 65-year male patient came to outpatient department with pain burning sensation in right lower extremities in the last 2 months. Tenderness with right lower extremity with fever since 1 month. Intolerance of heat. Burning with oedema in right lower extremity in the past 15 days. Aggravation: heat, touch, closed room. Amelioration; Open air, cold application.

PAST HISTORY: hypertension in the past 15 years, Dm 2 since 5 years.

FAMILY HISTORY: Mother died due to cancer, Father died due to cardiac arrest, Wife apparently healthy, One son apparently healthy.

GENERAL PHYSICAL EXAMINATION

APPETITE: Good, **THIRST:** thirstless, **DESIRES:** Nothing specific, **AVERSION:** Nothing specific, **BOWELS:** irregular, satisfactory, **URINE:** 3-4 times a day,

SWEAT: profuse on the face **SLEEP:**

HABITS/ADDICTION:

THERMALS: Hot patient

MIND: jealous, can't think clearly

STOOL: Constipated.

ANALYSIS OF CASE:

COMMON SYMPTOMS: pain with burning sensation in right lower extremity. Tenderness in right lower extremity with fever.

UNCOMMON SYMPTOMS: Painful tenderness over right lower extremity aggravation from heat, touch, closed room.

EVALUATION OF CASE:

Mind jealousy

Thirstlessness

Stools constipation

Extremities tenderness

Burning sensation in the right feet

Pain in right lower limb aggravated by heat, touch, closed room.

Pain lower limb ameliorated by cold application, open air.

TOTALITY OF CASE:

Mind jealousy

Thirstlessness

Stools constipation

Extremities tenderness

Burning sensation in the right feet

Pain in right lower limb aggravated by heat, touch, closed room.

Pain lower limb ameliorated by cold application, open air.

RUBRIC CONVERSION

Pain: Burning, smarting

Pain: Touch Aggravation

Aggravation: Warmth, heat

Amel: cold

Amel; open air

Dropsy: External

Mind Jealousy

Constipation

Thirstlessness

Cellulitis

SELECTION OF REPERTORY:

Complete Repertory

EVALUATION OF CASE

Mind jealousy

Thirstlessness

Stools constipation

Extremities tenderness

Burning sensation in the right feet

Pain in right lower limb aggravated by heat, touch, closed room.

Pain lower limb ameliorated by cold application, open air.

RUBRIC CONVERSION

[Extremities] Pain: Burning, smarting

[Extremities] Pain: Touch

[Modalities] AGGRAVATION: Warmth, heat

[Generalities] Cold: Amel.

[Generalities] Air:Open:Amel.:

[Generalities] DROPSY: External

[Mind]Jealousy:

[Stool) Constipation:

[Stool and Rectum] Rectum: Constipation

[Thirst] Thirstlessness

[Generalities) CELLULITIS:

REPERTORIAL RESULT: Apis mellifica 37/11 , Phosphorous 36/11, lycopodium 34/11

REMEDY CHOSEN: Apis mellifica

ASSESMENT OF SUSCEPTABILITY:

1. Susceptibility of patient
2. Seat of disease
3. Nature and intensity of disease
4. State and duration of disease
5. Previous treatment

POTENCY AND DOSE

200CH and1 dose

MANAGEMENT:

Elevate the affected part to reduce swelling and pain.

Move the joint near the affected area to prevent stiffness

FOLLOW UP

1.Patient feeling slightly better but complaints still persisting

Rx. Apis mellifica 200 1 dose

2.Patient complaints have reduced than before

Rx.SL 1month

3.Patients complaints have reduced completely

Rx.SL 1month



[Fig no: 1] Before treatment, 03. Sep. 2024

[Fig no: 2] After treatment, 13. Oct. 2024

CONCLUSION: Summary of the case: A 65-year-old man with burning, edema, sensitivity to touch, and discomfort on 03-09-2024. was prescribed Apis Mellifica 200CH, which led to improvements in his mental state, reduced swelling, and sensitivity. Before (Fig no:1) and After treatment (Fig no:2) were shown in Fig: 1,2 This treatment prevented further reduced Symptomatology, and repertorization was performed using the Complete repertory The patient was prescribed medicine in centesimal potency, and they showed improvement within two months. case was assessed based on the reportorial totality of symptoms.