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## Homoeopathic management of venous ulcer: A case study

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### Abstract

Venous ulcers (stasis ulcers or varicose ulcers) are wounds caused by malfunctioning of venous valves, especially in the legs. It is among the most dangerous chronic venous insufficiency consequences. They are chronic and recurring in nature, with accompanying morbidity and a reduced standard of life. The general rate of incidence for men is 0.76%, whereas for women it is 1.42%. When a venous valve becomes damaged, it prevents the backflow of blood, causing venous pressure, hypertension, and, eventually, venous ulcers. These are primarily present on the medial distal leg, which is usually painful, bleeding, and infectious. Case summary: A 79-year-old male patient presented with a recurring ulcer on the lateral aspect of the left ankle. He was treated with individualised homoeopathic remedy *Lachesis Mutus* in 0/1 potency based on the totality along with the external application of *Calendula* glycerine. The present study ensures the successful treatment of venous ulcers with homoeopathic medications, as well as the external aid of cleaning and dressing with the homoeopathic antiseptic *Calendula* to aid in granulation and ulcer healing. After several months of follow-up with appropriate homoeopathic treatments, the ulcer was nearly cured, which hastened the cure.

**Keywords:** Homoeopathic, treatments, ulcer

### Introduction

Venous ulcers are chronic lesions resulting from ambulatory venous hypertension in the lower extremities, either due to a vein valve reflex or in conjunction with venous obstruction [1, 2]. The American Venous Forum defines lower-limb venous ulcer as "a full-thickness defect of the skin, most frequently in the ankle region, that fails to heal spontaneously and is sustained by chronic venous disease (based on venous duplex ultrasound testing)" [3]. The pathophysiology of venous ulcers, including duration and infection, defines their classification as a sign of severe chronic venous insufficiency (CVI) [4]. Patients with venous diseases have generally diseased, ischemic tissue in their lower legs, and minor damage can result in an ulcer [5]. Skin damage is caused by venous hypertension and limb oedema, and symptoms include pain, limb being heavy, and difficulty walking. Varicose veins, dermal weeping, stasis dermatitis, skin darkening, and subcutaneous fibrosis are all common symptoms. The ulcer is irregular in shape with well-defined borders and is typically located in the peri-malleolar region ("gaiter" area). The wound is usually limited to the subcutaneous plane, although subsequent infection can cause extensive soft tissue damage [3]. If not adequately treated, VLU may progress to non-healed or granulating VLU, leading to physical immobility, decreased quality of life, cellulitis, serious infections, osteomyelitis, and neoplastic transformation [6].

### Case report

#### Patient Information

A 79-year-old male patient was a farmer, non-hypertensive, diabetic, and non-smoker presented with complaints of an ulcer on the left ankle with pricking pain and itching over the area of the ulcer, reported on 13.12.2022. The complaints of varicose veins started 30 years ago, and he developed an ulcer over the left ankle in 2002, for which he underwent skin grafting with no improvement. Then he had a recurrent ulcer on the left leg, which heals and recurs. Around the ulcer, small eruptions appear with itching that leads to ulceration. The pain is worse while prolonged standing and hanging down legs. There is no history of any trauma, tingling or numbness of his toes, pain over joints or loss of

sensation, muscular weakness, fatigue or weakness. His bowel and bladder habits are regular. He has had varicosity of veins on his left leg for the last 30 years and was treated with allopathic medication.

### Medical History

He is a known case of diabetes mellitus and was under allopathic medication.

### Clinical Findings

#### Physical Examination

The patient looks normal, with no pallor, no icteric, no cyanosis, no clubbing, no findings of koilonychia/leukonychia, no lymphadenopathy or thyromegaly, Oedema: swelling over the left lateral malleolus, Skin: Varicosity seen in the left leg, Pulse: 70/min. All the peripheral pulses are present, Blood pressure: 128/80 mm of Hg, Respiratory rate: 18/min, Temperature: 98°F

### Local Examination

Location of the ulcer: Irregular ulcer in the anterolateral part of the left leg. Margins are irregularly defined. Size is about 5 x 3 cm and the floor of the ulcer is covered with a slough, yellowish base with sloping edge. The surrounding skin is pigmented and warm, with varicose veins of variable size and shape on the left leg. All the peripheral pulses are

normal.

### Final Diagnosis

Venous ulcer on left leg.

### Totality of Symptoms

Painful ulcer on medial aspect of left ankle, pricking type of pain with pustular discharge. The base of the ulcer is yellowish in colour with unhealthy discolouration of surrounding skin. The pain is worse on hanging down the leg and on initial motion, and better on continuous motion. There is tortuosity of veins in both legs.

### Results and discussion

#### Prescription

Rx  
LACHESIS 0/1, 1D(HS)

#### Basis of Prescription

Varicose ulcer on left leg, with thin, watery discharge. Oversensitive to pain with blackish appearance and unhealthy base.

#### Potency Selection

As per the susceptibility of the patient and the pathology of the disease, LM potency was given.

### Follow up

S.no	Date	Symptoms	Remedy	Inference
1.	13.12.2022 – 19.12.2022	Varicose ulcer on left leg, pricking pain over the ulcer. And watery discharge from the ulcer. Swelling on left ankle joint	Rx 1. Lachesis 0/1/1D(HS) 2. Cleaning & Dressing	Complaints persist.
2.	20.12.2022- 26.12.2022	Pain in left ankle region increased. Ulcer persisting.	Rx 1. Lachesis 0/3/1D(HS) 2. Cleaning & Dressing	Pain over the ankle increased.
3.	27.12.2022- 09.01.2023	Varicose ulcer on left leg persisting. Pricking pain in left ankle increased < walking, hanging down the leg	Rx 1. Vipera 200/1D in 10ml aqua × TDS 2. Cleaning & dressing	Pain in left ankle increased.
4.	10.01.2023- 06.02.2023	Varicose ulcer on left leg better, pricking pain in left ankle persisting.	Rx 1. Vipera 1M/1D in 10ml aqua × TDS 2. Cleaning & dressing	Pricking pain over the surrounding area of the ulcer was persisting, so the next higher potency was given.
5.	07.02.2023	Varicose ulcer on left leg better, pain over the left ankle better.	Rx 1. Lachesis 0/6/1D(HS) 2. Cleaning & Dressing	Pain over the ankle better.
6.	04.03.2023	Itching over the left ankle and new eruptions over left leg then formation of new ulcer over the lateral malleolus, with pricking pain.	Rx 1. Lachesis 0/6/1D(HS)	New ulcer appeared. Pre existing ulcer slightly better.
7.	01.04.2023	Varicose ulcer on left leg and pain better. RBS: 148 mg/dl	Rx Lachesis 0/6/1D(HS)	Complaints better.
8.	16.05.2023	Varicose ulcer on left leg and pain better.	Rx Lachesis 0/6/1D(HS)	Complaints better

### Prognosis assessment images



**Fig :** Prognosis Assessment images.

**Discussion**

The case of venous ulcer was initially prescribed with Lachesis Mutus in 0/1 potency and when no marked improvement was observed the potency was raised to 0/3 potency. Later when the pain increased, he was prescribed

with Vipera 200 and 1 M potencies to alleviate the pain. When pain was better, he was prescribed with Lachesis Mutus 0/6 potency. Along with the internal medication, the ulcer was cleaned and dressed with Calendula Glycerine in order to promote healthy granulation. The indications of the

remedies used are as follows.

### Lachesis

- Ulcers that are surrounded by pimples and vesicles, and smaller ulcers.
- Varicose veins ulcerate.
- Ulcers with offensive odour and uneven bluish bottom, chronic indolent ulcers.
- Ulcers of leg with an uneven and dirty bottom; offensive odour with thin discharge.
- Sphere of action-Blood, circulation, left side.

### Vipera berus

- It is indicated in inflammation of veins with great swelling and bursting sensation.
- Patient is compelled to keep the extremities elevated.
- When the legs are allowed to hang down, the pain is unbearable and it seems as if it would burst.
- Varicose veins and acute phlebitis.
- Veins swollen and sensitive with bursting pain.
- Severe cramps in lower extremities.
- Sphere of action- Veins and blood.

### Calendula officinalis

- It is a most remarkable healing agent when applied locally.
- It is indicated for open wounds, and ulcers and parts that will not heal, etc.
- It promotes healing by first intention and healthy granulations. It helps to make acrid discharge healthy and free and also has remarkable power to produce local exudation.

### Conclusion

Venous ulcers are a major consequence of varicose veins. It is a reoccurring type of ulcer that might last for a long time. However, in this case, homoeopathy and its role in venous ulcer management have been demonstrated. This case report shows the effectiveness of homoeopathic medicines in the treatment of venous ulcers, though there are several remedies available in Materia medica for varicose ulcers, the exact similitum should be administered based on the symptom similarity along with the accessory measures of cleaning and dressing which aids in gentle cure.

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