

Non Surgical Treatment of Renal Sol with Carcininum: A Homoeopathic Case Report

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Abstract: A space-occupying lesion (SOL) is a lesion of a defined volume and has the potential to intrude on surrounding structures. One of the most prevalent locations for urinary system tumours is the kidney. Renal malignant tumours (renal cell carcinoma, renal pelvic carcinoma, and metastatic malignancy), hamartoma, angiomyolipoma, renal cyst and ambiguous lesions are the most common SOL of Kidney. Ultrasonography is considered an optimal imaging technique to detect renal tumours and is extensively used for early screening and routine diagnosis of such tumours. Surgical removal of renal SOL is the choice of treatment in modern medicine. This is a case of a 37 years old female with a space-occupying lesion of the right kidney. The patient was suffering from low back pain and pain in the right iliac region of the abdomen for two and half years. After individualized homoeopathic medicine, Carcininum 200 was prescribed & within 2 - 3 months, the SOL was completely reduced.

Keywords: Space Occupying Lesion, SOL, Carcininum, Homoeopathy

1.Introduction

Kidneys are the common sites for SOL. SOL of the kidney can be benign or malignant. [1] Common malignant renal SOL is clear cell renal carcinoma, papillary renal cell carcinoma, cystic renal cell carcinoma, Chromophobe renal cell carcinoma, transitional cell carcinoma, Haematoma, Oncocytoma, Hydronephrosis, and Perinephric abscess[1, 2]. Lesions such as hamartoma, angiomyolipoma, renal cyst and ambiguous lesions are prevalent benign SOL. However, malignant kidney lesions account for a bigger proportion, and symptoms frequently present late. [1] Because most kidney tumours are asymptomatic at first, ultrasonography is used to detect them [1]. Due to the limits of ultrasonography, a CECT scan or CEMRI may be required for additional localization and diagnosis [1]. Patients usually present with lumbago and soreness of the lower back, hematuria, poor appetite and abdominal discomfort, fever, and urinary tract infection and most of the patients are asymptomatic and discovered during routine examination [1].

2.Case Report

Patient information:

A 37 years old female already diagnosed with a space-occupying lesion of the right kidney visited the National Institute of Homoeopathy, Kolkata (NIH) Hospital on 22nd December 2020.

Chief complaints:

1. Aching low back pain with straining sensation that worsens at night, morning, and first motion and improves with continued motion.
2. Stitching pain in the right iliac region that worsens when sleeping on the back at night and improves with pressure and hot application.

Duration: two and half years.

On examination abdomen was soft, slightly tender, with no palpable mass present, no muscle guard present scar mark was present in the right iliac region.

USG Report: In the interpolar region of the right kidney, there is a 27mm x 21mm x 12mm space-occupying lesion and a 14mm x 10mm Nabothian cyst. [7.12.2020]

History of Present complaint:

Complaints began progressively two and a half years ago and were treated with homoeopathic drugs that temporarily relieved symptoms. However, the USG report from October 27th, 2018, suggests that the size of the right kidney's SOL gradually grew.

Past history:

The patient had appendicitis which was treated surgically.

Family history:

Paternal side- Father had hypertension, three uncles died of cancer, one of testicular carcinoma, one of unknown malignancy, and another of leukaemia.

Maternal side-Mother had uterine fibroid, maternal aunt had pulmonary tuberculosis.

Generalities: Mental and Physical General.

The patient's appetite and thirst were poor, with desire for eggs⁺⁺⁺ both fried and boiled, sour⁺⁺, salt⁺⁺. The stool was regular but not satisfactory. Profuse sweat on the face. Sleep disturbed with dreams of something sitting on her chest. The patient was hot⁺⁺. She was also suffering from milky leucorrhoea, which causes itching. Mentally she was irritable and headstrong.

Physical Examination: General & Systemic.

On deep palpation, slight tenderness was found on the right hypochondrium. Kidneys were not palpable. No other abnormal findings were detected from systemic examinations: respiratory, cardiovascular, gastrointestinal, nervous and other systems.

Analysis and Evaluation of symptoms:

Mental General:

- 1. Headstrong.
- 2. Irritable.
- 3. During sleep dreams someone is sitting on her chest.

Physical General:

- 1. Thirst reduced.
- 2. Desires for Eggs, sour things, and salt.
- 3. Perspiration of face.
- 4. Insomnia due to anxiety.
- 5. Cannot tolerate heat.
- 6. Leucorrhoea, itching of genitalia.

Particulars:

- 1. Aching in the lower back aggravates at night during sleep, morning, on first motion and ameliorates on the continued motion.
- 2. Stitching pain in lower abdomen right side, aggravation on lying on back at night and amelioration on pressing and hot application.

The totality of Symptoms with miasm:^[3, 4, 5]

- 1. Headstrong: Syphilis
- 2. Irritable: Psora and Sycosis
- 3. During sleep dreams someone is sitting on her chest: Sycosis
- 4. Thirst reduced: Psora
- 5. Desires for Eggs: Psora
- 6. Desire Salt: Psora and Syphilis
- 7. Perspiration of face: Psora
- 8. Sleep disturbed due to anxiety: Psora
- 9. Hot Patient: Syphilis
- 10. Aching pain in the lower back aggravates during the night during sleep: Syphilis
- 11. Aching pain in the lower back ameliorates on the continued motion: Sycosis
- 12. Stitching pain in lower abdomen right side, aggravation on lying on back at night: Syphilis
- 13. Stitching pain in lower abdomen right side, amelioration on pressing and hot application: Psora and Sycosis.

From the miasmatic analysis, it is clear that the patient is multimiasmatic with predominance of Psora.

Repertorial Result:^[6]

Considering the above symptomatology, Synthesis Repertory was selected for repertorisation and was done using RADAR software. Many drugs were competing with each other after repertorisation from the aforesaid symptomatology, particularly Sulphur, Spongia Tosta, Phosphorus, Agaricus Muscarius, and Carcinosinum, as more emphasis was placed on family history of cancer and tuberculosis.

Figure 1: Repertorial sheet of the case done on RadarOpus 2.2.16

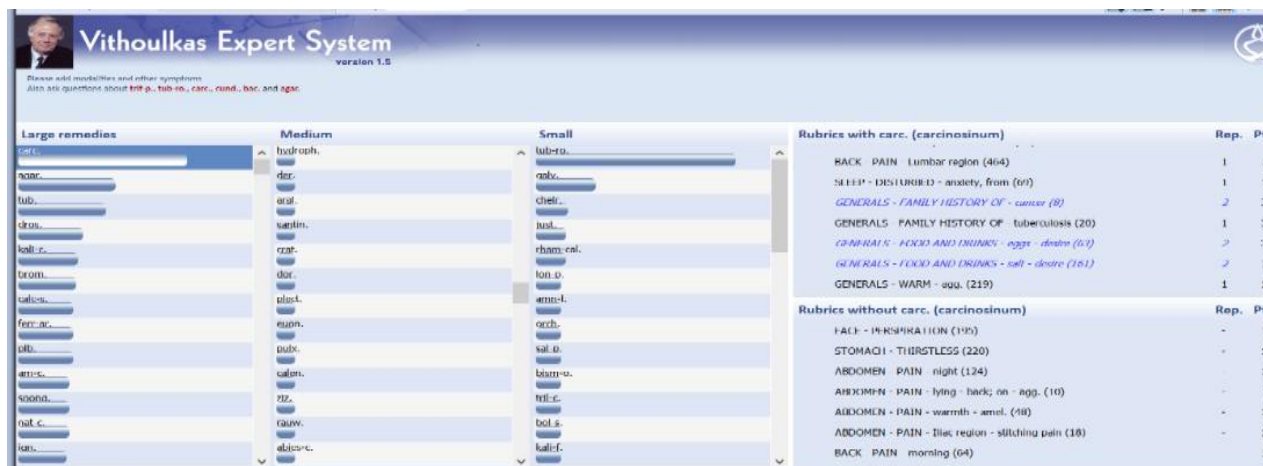


Figure 2: Vithoulkas expert system result after Repertorisation on RadarOpus 2.2.16

Final Selection of Remedy:

Among the top 5 remedies in the Repertorization results, only Carcinosisinum covered the rubric "family history of cancer." Carbo-animalis was another drug that addressed this issue; however, it received a lower grade. Another tool, the Vithoulkas expert system, recommended "Carcinosisinum," as the first Large Remedy. It was determined that Carcinosisinum was the ideal choice for treating this illness because its mental and physical features matched well with its drug profile. [7] A single dose of Carcinosisinum 200 in distilled water was followed by a month of placebo.

Follow up:

1st follow up was on 24.02.2021, patient bring the CECT SCAN OF K. U. B. Report (advised by nephrologist) dated 20.02.2021 and it says no focal SOL or hydronephrotic change is noted on either kidney.

Changes in symptoms: low back pain was reduced to a minimum and pain in the iliac region did not appear again. Leucorrhoea reduces but persists. Sweat on the face reduces but persists. Sleep became normal.

Table 1: Assessment of the case according to Modified Naranjo Criteria for Homoeopathy for inventory

S. no.	Domains	YES	NO	N/A
1.	Was there an improvement in the main symptom or condition for which the homeopathic medicine was prescribed?	+2	-	-
2.	Did the clinical improvement occur within a plausible timeframe relative to the drug intake?	+2	-	-
3.	Was there an initial aggravation of symptoms?	-	0	-
4.	Did the effect encompass more than the main symptom or condition (i.e., were other symptoms ultimately improved or changed)?	+1	-	-
5.	Did overall well-being improve? (Suggest using validated scale)	+1	-	-
6. A	A Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?		-	0
6. B	Direction of cure: did at least two of the following aspects apply to the order of improvement of symptoms: -from organs of more importance to those of less importance? -from deeper to more superficial aspects of the individual? -from the top downwards?		-	0
7.	Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?	-	0	-
8.	Are there alternate causes (other than the 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)	-	+2	-
9.	Was the health improvement confirmed by any objective evidence? (e.g., laboratory test, clinical observation, etc.)	+2	-	-
10.	Did repeat dosing, if conducted, create similar clinical improvement?	+1	-	-

Total score: 11: MONARCH inventory score for this case was 11 which suggest a "definite" causal attribution between the medicine and the outcome.

3. Discussion

The patient has been experiencing right iliac pain since 2018. A CT scan on 27.10.2021 revealed an SOL on the right kidney, perhaps the 'Column of Bertin'. The right kidney SOL was surgically removed. The patient sought

homoeopathic care to prevent surgery. She abandoned up on local physician treatment after several CT scans and USG examinations revealed no improvement in her SOL. On December 22, 2020, she went to NIH, OPD-9. It was recommended that the patient take Carcinosisinum 200, single-dose, based on their symptoms and a recent USG study from 07/12/2020 that revealed "An iso to hypoechoic SOL in the interpolar region of the right kidney."

After Repertorisation, the top 5 medicines, in this case, were Sulphur, Spongia Tosta, Phosphorus, Agaricus Muscarius and Carcinosinum. The remedy recommended by Materia Medica was 'Carcinosinum,' potency of 200, based on the patient's susceptibility. On the 24th of February 2021, there was no longer any back pain and no iliac discomfort. Leucorrhoea reduced. Face perspiration decreased. Sleep improved. A little calculus measuring

2x2 mm was discovered in the right kidney in a CECT report dated 20.01.2021, which stated: "No SOL" in the right kidney. A single dose of the homoeopathic medicine Carcinosin 200 caused SOL to recede within a month. As a result, a "USG KUB" was proposed to monitor the homoeopathic treatment's responses. On 05.09.2021, a little calculus and cortical scarring were detected in the right kidney.

Table 2: chronology of the radiological investigations done in this case with findings:

Date	Impression	Size of the SOL
27.10.2018	USG whole abdomen report: Ill-defined isoechoic to hypoechoic Space occupying lesion in the posterior aspect of the interpolar region of the right kidney. (figure:3)	24x17mm
p11.12.2018	CT scan report: Well defined focal lesion of heterogeneous enhancement at the hilar level in the right kidney (figure:4)	1cm approx.
22.05.2019	CT scan report: The lesion under investigation remains almost identical to the previous study dated 11-12-2018- possibly a Column of Bertin. (figure:5)	No comments given
09.12.2019	CT scan report: Ill-defined focal lesion at the interpolar area, posteriorly. (figure:6)	No comments given
07.12.2020	USG-KUB report: An iso to hypoechoic SOL in the interpolar region of the right kidney. (figure: 7a and 7b)	27mmx 21mmx12mm
21.01.2021	CECT scan of K.U.B with urography report: a) Tiny right renal calculus. b) Cu 'T' in-situ. (figure : 8a and 8b)	Not Found
05.09.2021	USG-KUB report: Small right renal calculus with a focal area of cortical scarring. (figure: 9a and 9b)	Not Found

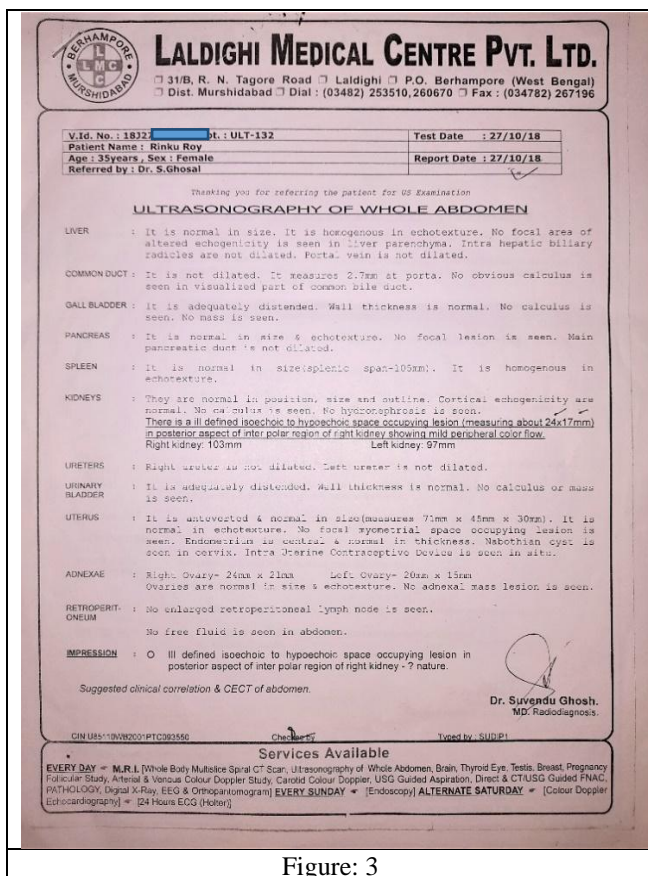


Figure: 3

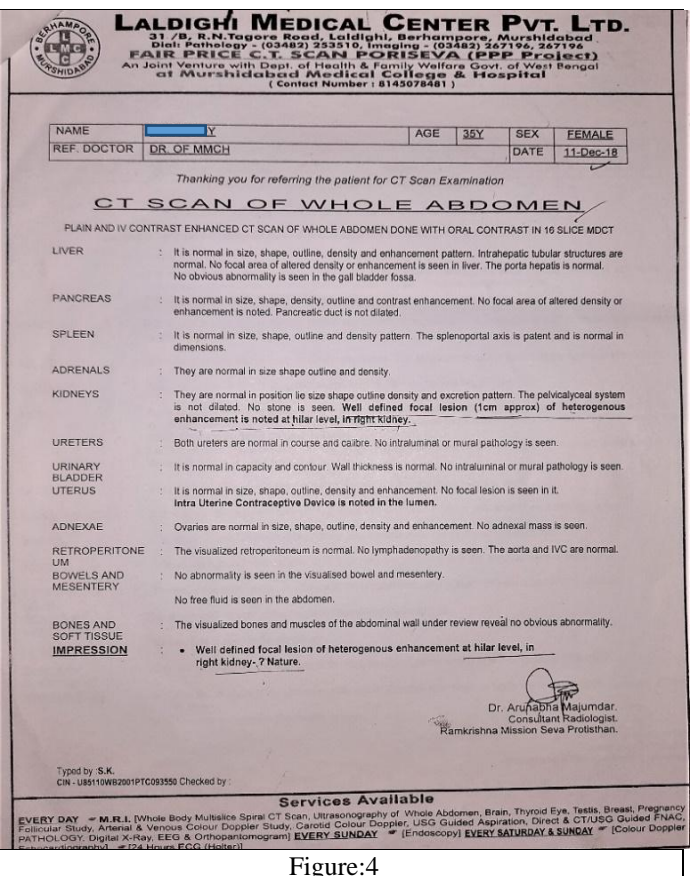


Figure:4

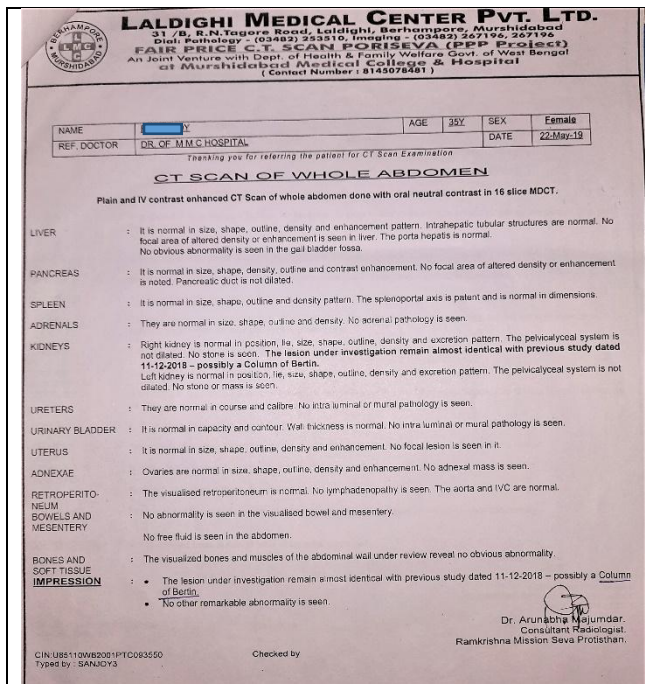


Figure: 5

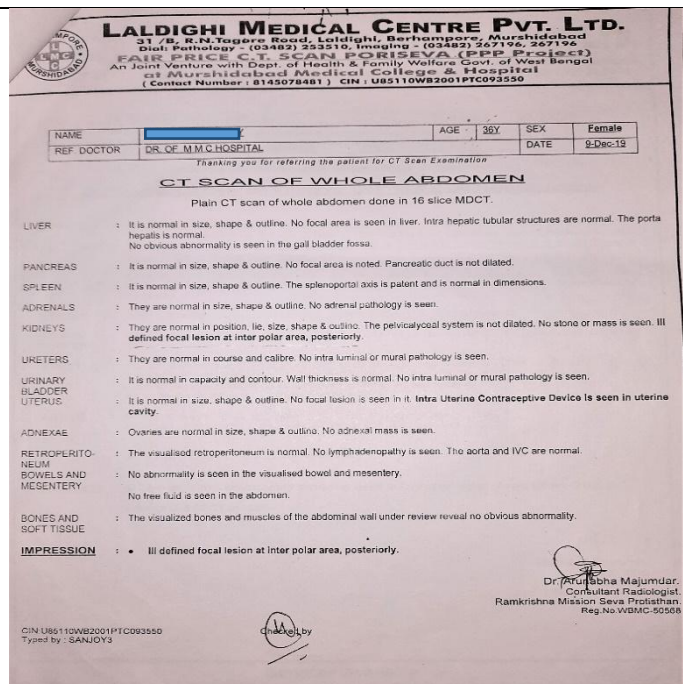


Figure: 6

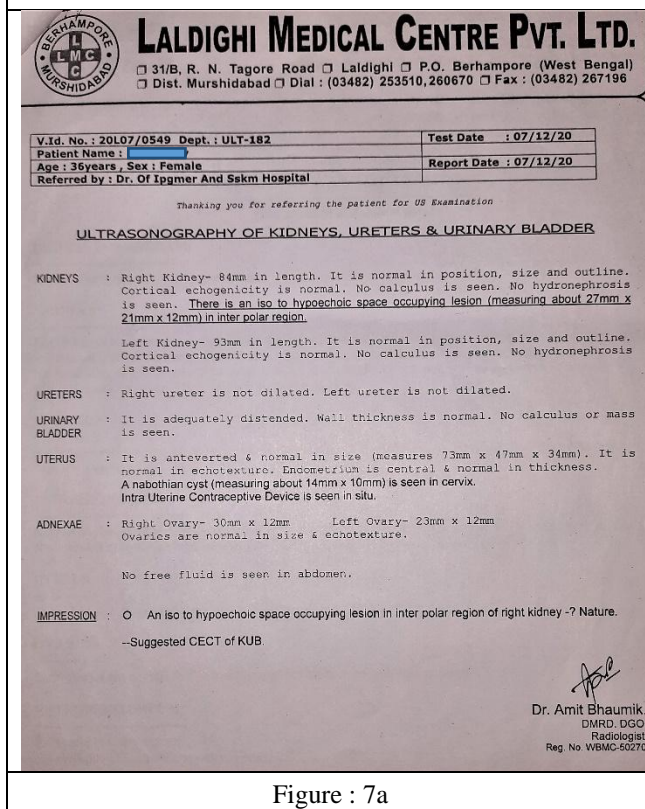


Figure : 7a

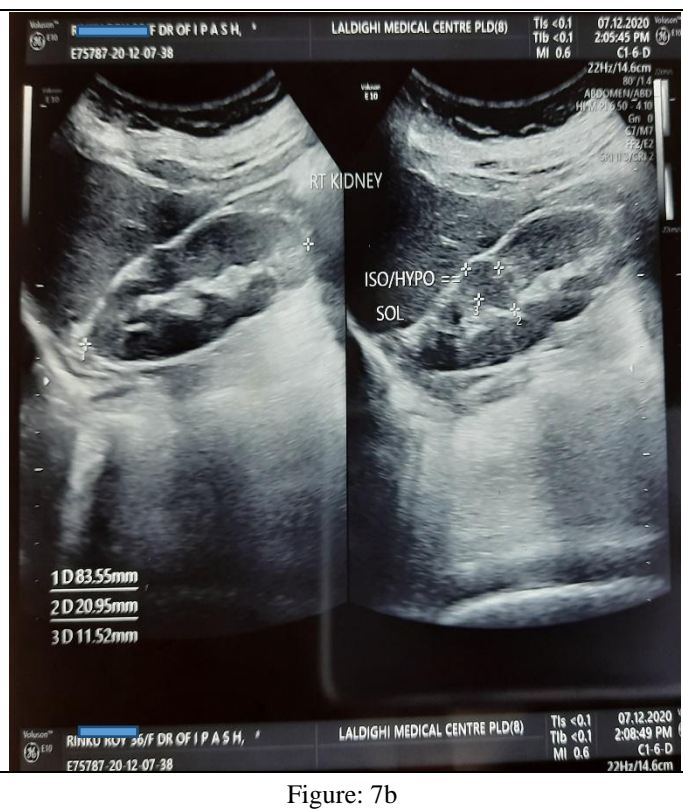


Figure: 7b

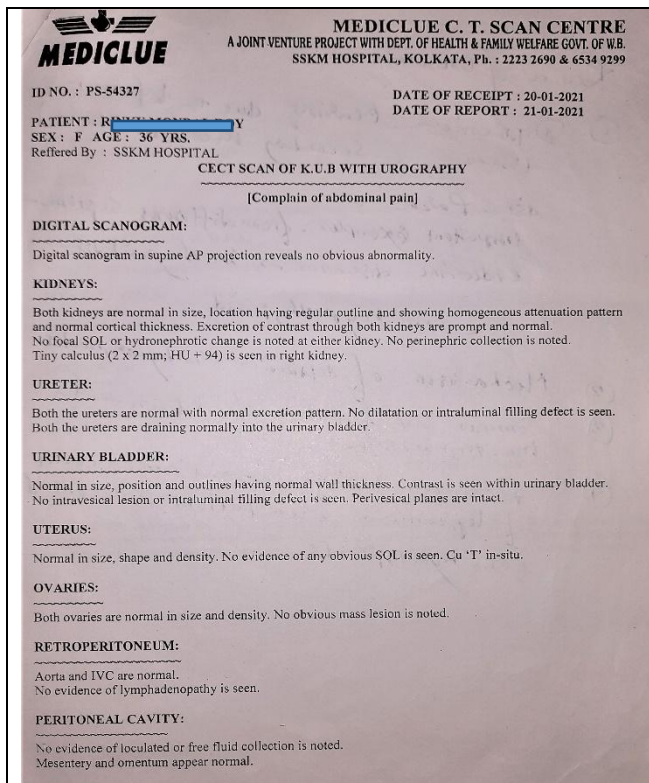


Figure: 8a

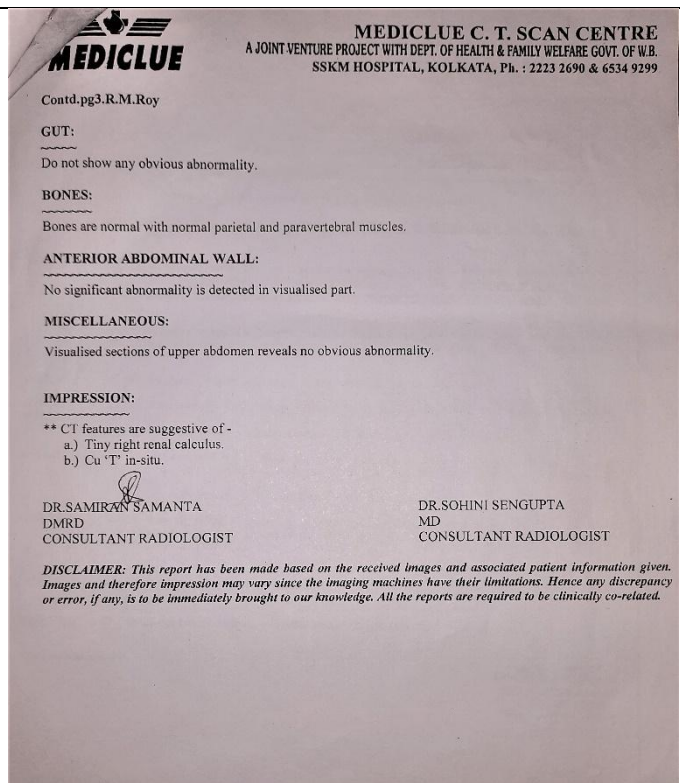


Figure: 8b

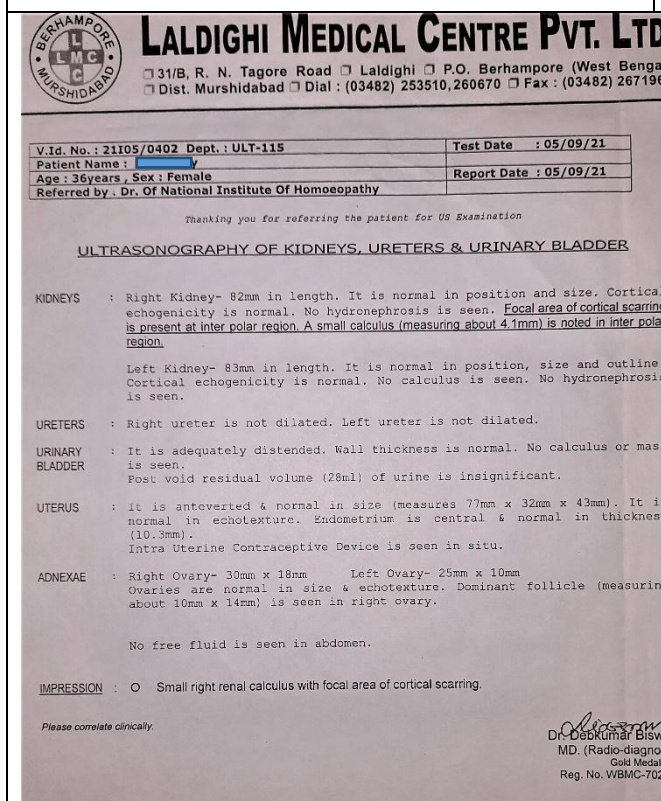


Figure: 9a



Figure: 9b

4. Conclusion

Homoeopathic medicine Carcinosinum 200 was prescribed on basis of individualization in this case S.O.L right kidney had shown marked improvement. Carcinosin given in 200 potencies, proved its curative effect to regress ‘SOL in right kidney’ and provide relief to

symptoms of the patient. This case explored the possibility and scope of homoeopathy in reversing the tissue changes and preventing patients from surgery.

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Conflicts of Interest: None declared.

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