

Clinical Verification of Symptomatology of Carcinosis

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Abstract: *The introduction of cancer nosodes by Compton Burnett is one of the major addition to the sources of Homoeopathic drugs. Among them Carcinosis is the commonly used nosode which came into light in the later part of 19th century. Carcinosis being a drug of disease product carry itself a lot of potential and virtue but because of the insufficient knowledge due to poor pathogenic information and lack of relevant literature, its application has been limited. By proper analyzing the verified symptoms will add to the confirmation and value of each symptom. The ongoing study aims at ascertaining the symptoms improved during verification. To study the sphere of action and characteristics of the drug. To explore its utility in various clinical cases. To study its applicability as a constitutional medicine in indicated cases. In non-randomized experimental study, random sampling of 30 cases was selected on the basis of available drug symptomatology and specified eligibility criteria. The medicine was prescribed as per the homoeopathic principles. Analysis of the case was done on the basis of descriptive statistics. Mainly analysis under 4 categories symptom-verified, improved, and not improved in some-partially verified, not improved-Not verified and new clinical findings.*

Keywords: Carcinosis, Verified, New observation, cases.

1. Introduction

Cancer has become a major cause of health problems worldwide, Homoeopathy has given the treasure of extracting the curative principles from the product of this disorder. The entire homeopathic fraternity is grateful to Donald Foubister and W. Lees Templeton. Carcinosis being a nosode of cancer has a lot of potential that has not yet been explored. It has a wide range of applicability in clinical practice. But so far the studies have highlighted more towards mentals and generals with lesser characteristics. Just as one need to understand the portrait of the patient through the expression of sign and symptom so is to understand the portrait of the remedy, one needs to incorporate the ongoing clinical experiences of patients which may demand continuous modifications. In order to ensure the fineness and depth of the portrait it is important to have multiple facets and evolutionary perspectives. These are possible provided if the physician has a sound conceptual base to analyze and synthesize clinical experiences integrating psychosomatic, and clinicopathological aspects. Several homoeopaths including Master Hahnemann, Boevinghausen, Kent, and Hering to the recent work by Dr. Michel Van Wassenhoven have highlighted that clinical verification will add to the current works and help in building a Materia medica which will be complete and thoroughly verified. Hence this work aims at verifying the symptomatology by ascertaining the clinically improved symptoms and to get a broader idea of its sphere of action and characteristic symptoms and its use as a constitutional remedy. An expanded study would enrich in understanding the pathogenic symptoms of carcinosis and to verify the presenting symptoms..

2. Methodology

- 1) Study setting: Participants for the study were drawn from the OPDs from Ahmedabad Homoeopathic Medical College
- 2) Study Population: Patients attending OPD(outdoor patient department) and IPD (indoor Patient department) of Ahmedabad Homoeopathic Medical College;Sainathospital.
- 3) Study duration: 1 year
- 4) Sample size: Random sampling of 30 cases irrespective of age, sex, and socioeconomic status fulfilling the inclusion and exclusion criteria.
- 5) Study procedure:
 - Selection of cases from OPD and IPD. - Proper case-taking procedure as per the rule laid in Organon. Totality formation and repertorization as the case demands.
 - Prescribing Carcinosis in potency and repetition as per the need of the case.
 - Regular follow-up of the cases as per requirement.
 - Assessment of the follow-ups and recording the symptoms of improving, not improving SQ.
 - Analysing the recorded Data and verifying the symptoms with sources referred.
- 6) Study Design: Non-
- 7) Randomized, Experimental study.
- 8) Inclusion criteria: Patients corresponding to the symptomatology of medicine.
- 9) Exclusion criteria: i) Clinical presentation not corresponding with medicine. ii) Cases with irregular follow-up.

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- 10) Outcome assessment: Follow-ups of the patient were taken at regular intervals (as per the case demand) and the outcomes were assessed.
- 11) Study Tool: i) Appropriate case-taking format ii) Carcinosis of different potency iii) Repertory,
- 12) Materia medica, articles (reference)
- 13) Study technique: Non Randomized Experimental study -Prospective study
- 14) Data analysis: Response will be analyzed into 4 criteria:
 - a) Symptoms existing/ present in medicine →Improved →Verified.

- b) Symptoms existing/ present in medicine →Improved in some and not improved in some →Partially verified.
- c) Symptoms existing/ present in medicine →Not improved →Not verified.
- d) Symptoms not existing in medicine → Yet improved →New clinical i. Finding/observation.

3. Analysis

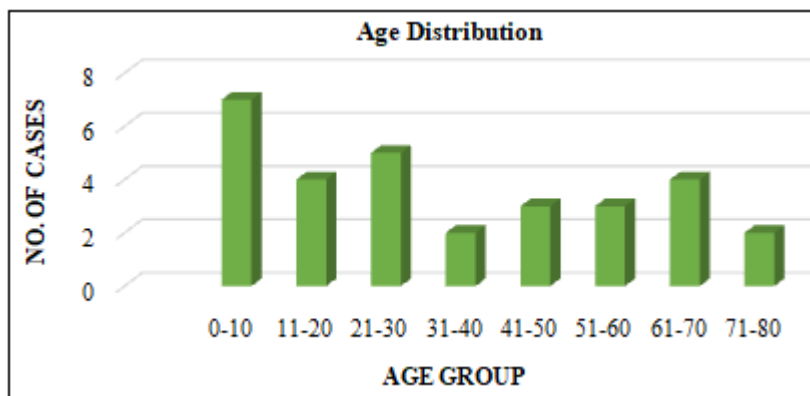


Figure 1: Distribution according to age

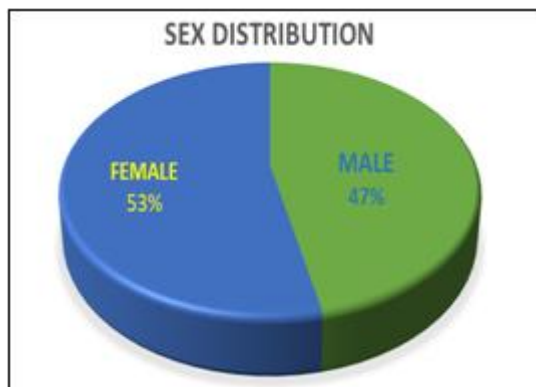


Figure 2: Distribution according to gender

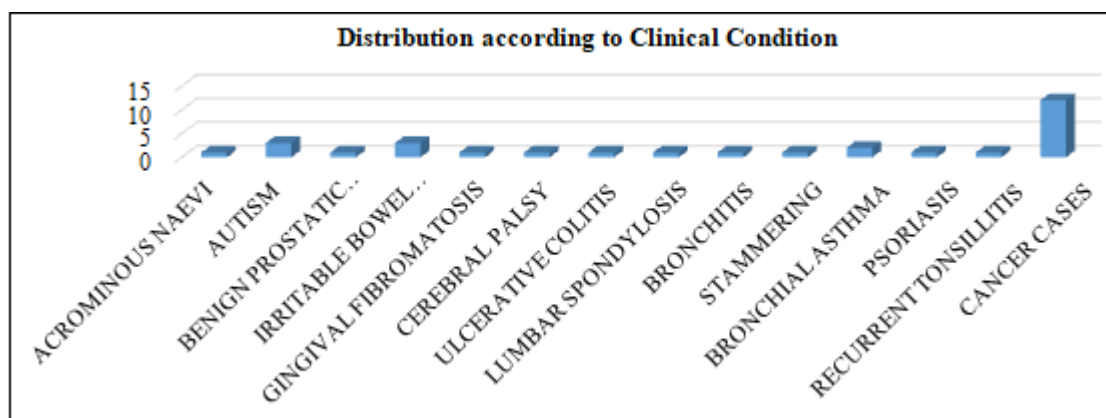


Figure 3: Distribution according to clinical condition

Table 1: Mental symptoms- Verified during the study

No. of Cases	No. of Symptoms	Symptoms
13	1	Fastidious
10	1	Fear-(dark, noise, height, animals, alone, death)
9	1	Suppression-(anger, Emotion)
7	4	Anxiety; Sensitive (Noise, Reprimand, sad stories, Cruelties, others being hurt); Irritable; Sympathetic
6	1	Obstinate
5	1	Cry, weeping
4	5	Timid; Music; Artistic aptitude; Possessiveness; Memory active
3	7	Anger; Smiling; Religious affection; Travel desire; Takes time to mix with others; Intellectual; Love for animal
2	12	Cheerful; Dance; Laughing; Happy on seeing others happy; Company desire; Responsible; Reserved; Precocious; Father attached to; Startling sound-noise from; Obedient; Reading desire for
1	27	Yielding; Talking indisposed to; Selflessness; Despair; Desire monsoon; Occupation diversion>; Father strict; Grief of death of loved ones; Suicidal disposition, Complaining; Answers monosyllabus; Bites; Restlessness; Offended easily; Worries full of; Sociability; Benevolence; Affectionate; Sentimental; Destructive; Disciplined; Loves playing; loves watching tv; Suspicious; Jealousy; Brooding; Guilty feeling

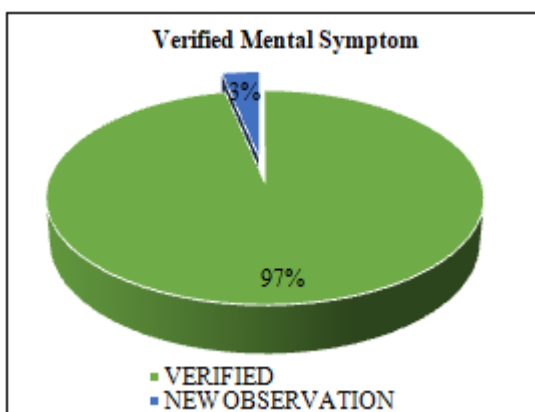


Figure 4: Mental symptoms-verified

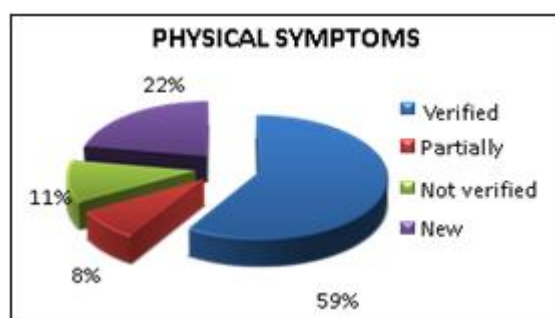


Figure 6: Symptoms verified/not verified/New

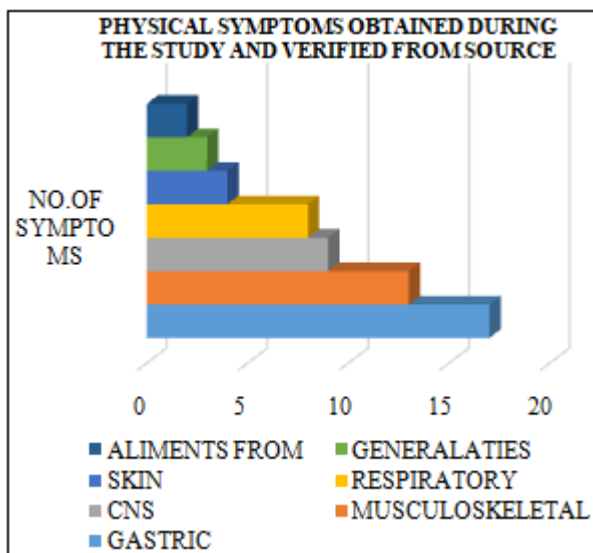


Figure 5: Distribution according to the sphere of action

Table 2: Physical symptoms -Verified / Not verified / New

S No.	Category	No. of Symptom	Percentage (%)
1	Verified	37	60.65%
2	Partially verified	05	8.19%
3	Not Verified	07	11.47%
4	New	14	22.95%

4. Discussion

Maximum age group covered was 0-10 year and the least covered age group was 71-80 years

- Female were more compared to males
- Out of 30 cases 40% cases were of cancer and 60% were

In this study, a total of 61 symptoms each of mind and physical spheres were verified from the literature source including 2 new findings from the mind and 14 from the physical spheres.

New findings included

- Swallowing difficult *Choking sensation*Pain scapular region
- Speech (Autism) *Eye-to-eye contact (Autism)
- Neck holding
- Sitting (Autism)
- Backache-Lumbar region<standing, bike riding++, first motion++
- Expectoration-Wet white or yellowish-greenish sticky lumpy sputum (character of discharge even observed in stool)
- Stool sticky, lumpy
- Jumping
- Communication

Most frequently encountered and verified clinical symptoms were from the Gastrointestinal system, musculoskeletal, CNS, respiratory, skin, generalities, and ailments from -2.

Clinical conditions mainly covered were cancer(12), Irritable bowel syndrome(3), Autism(3), Bronchial asthma

(2), Bronchitis 1, Naevi, ulcerative colitis, cerebral palsy, lumbar spondylosis, stammering, recurrent tonsillitis, BPH showing better results.

5. Conclusion

A total of 122 symptoms including mind and physical spheres were obtained during the studies along with the physical generals. Also few new observations were also obtained during the entire study which added to the present symptomatological picture of the remedy

The study reveals that the symptoms of Carcinosis, as available in the literature have been verified. A number of new observations were also obtained in the study which was not mentioned earlier in literature and show its wider scope of therapeutic action.

6. Limitations

- Study was done on a small size data and the inference was drawn from it.
- Since this study is time-bound, therefore the cases could not be studied for a longer period.
- As the study is elaborate some human errors are expected.
- Advanced methodological study patterns using the Bayesian statistical approach were not included in this study design.

7. Recommendations

- A bigger sample size with an extended time of research would provide better results.
- Further studies are required to confirm more number of symptoms using modified study designs and enhanced research methodology.
- Calculation of LR will enable a more accurate and quantitative description of the strength of probable or claimed characteristic symptoms of the drug.
- Hence, further confirmation of symptoms in a larger sample group, polarity analysis and prospective estimation of LR of symptoms using the Bayesian statistical method in routine practice would enable more scientific and precise work.

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Author Profile



Dr Grishma Panicker received the MD Homoeopathic degree in Homoeopathic Materia Medica from Ahmedabad Homoeopathic Medical College in 2021. Currently working as an Assistant Professor in the Department of Homoeopathic Materia Medica at Ahmedabad Homoeopathic Medical College. Has actively

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