

# Homoeopathic Approach to Diabetic Foot with Osteomyelitis - A Case Study

Kapil Mayavanshi<sup>1</sup>, Kunal Mayavanshi<sup>2</sup>

<sup>1</sup>3<sup>rd</sup>Year BHMS, Yenepoya Homoeopathic Medical College and Hospital, India

<sup>2</sup>3<sup>rd</sup> Year BHMS, Yenepoya Homoeopathic Medical college and Hospital, India

**Abstract:** *This Case Study Explores the Homoeopathic treatment of a Diabetic Foot with Osteomyelitis. The Patient, a known case of hypertension and Insulin - dependent Diabetes mellitus, was successful treated with homoeopathic approach, demonstrating its potential effectiveness in Managing such condition.*

**Keywords:** Preliminary data, presenting complaints, History of Presenting complaint, past history, family history, personal history, General physical Examination, Local examination, Systemic Examination, Lab Investigation, Provisional diagnosis, Remedial Diagnosis, Follow up, Conclusion

## 1. Objective

The purpose of this case study is to demonstrate the effectiveness of a homoeopathic approach in treating a diabetic foot with Osteomyelitis, a common complication in patient with diabetes.

Paper type - Case study

## 2. Case Study

Preliminary Data -

- Name - XYZ Nationality - Indian
- Age - 62 years Marital status - Married
- Sex - Male Occupation - Retired Postman
- Address - Karnataka
- Date of Examination - 10/10/2022
- Religion - Christian

**Presenting complaints -**

C/O Wound over right heel since 2 months

C/O swelling of right lower limb since 2 weeks

**History of Presenting complaints -**

He is a known case of hypertension and Insulin dependent Diabetes mellitus since 10 years. Patient was apparently well 2 months back he was injured over the right heel, initially started as small wound gradually progressed to the present size associated with bleeding from the wound site since 2 days. Patient also complaint of swelling over the right lower limb since 2 week which was insidious in onset, Complaint aggravates on walking, No Relieving factor

No H/O of fever and pain

No H/O of Trauma

No H/O of Discharge from wound

No H/O of loss of hair and fissuring of nails

No Scar marks or burns

No H/O of Tuberculosis

**Past history -**

K/C/O Hypertension and on tablet LOSCT 1 - 0 - 0, Tab GLIM M2 1 - 0 - 1

K/C/O Diabetes and on Insulin dependent Injection 3 time /day

H/O Right ICD Insertion for Chylothorax

**Family History -**

No Relevant history from paternal side

Mother is hypertensive

**Treatment History -**

Under Allopathic treatment for Diabetes and Hypertension

**Personal History -**

- Diet - mixed
- Appetite - Reduced since 2 days
- Craving – Fish 3+ meat 3+
- Hunger - Adequate
- Thirst - Decreased [1 litre/day]
- Habit - Alcohol 3+
- Bladder - Satisfactory [3 to 4 times/day]
- Bowel - Satisfactory [1 times/day]
- Desire – Nothing Significant
- Aversion - Nothing Significant
- Thermal – Hot Patient
- Dream - Not remembered
- Perspiration - Profuse
- Sleep - Disturbed



**General Physical Examination -**

Patient is well orientated with time, Place and Person  
Moderately built and Nourished  
Patient is conscious and Co - operative  
No history of Pallor, Icterus, Cyanosis, Clubbing, Oedema and Lymphadenopathy

**Vital data -**

BP - 130/80 mm of Hg [right arm supine position]  
Pulse - 88Bpm weight - 90kg  
RR - 16 breath/min Height - 160cm  
Temp - 98.6degree Fahrenheit BMI - 35.2 [OBESITY]

**Local Examination -**

No local rise of temperature  
Ulcer measuring 3cm\*2cm Present over right heel, Slough ++  
Calcaneum Exposed, No Active Bleeding, No Discharge or pus from the ulcer, No Erythema  
Peripheral Pulse Palpable  
Edge - Sloping Edge  
Shape - Irregular  
Base - Slight Induration  
Surrounding Area – Blackish Discoloration  
Location - Right heel  
Margin – Irregular

**Systemic Examination -**

Respiratory system: Normal Vesicular Breath sound heard, no added sound  
Cardiovascular system - S1 and S2 heard, No Murmur

**Lab Investigation-**

RBC - 3.42 million/cumm  
Total count - 15740/cumm  
Neutrophils - 73.2%  
Lymphocyte - 12.3%  
Eosinophil - 4.9%  
Monocyte - 9.2%  
Basophil - 0.4%  
Hb - 9.6g/dl  
PCV - 29.2%  
Platelet count - 386000/cumm  
MCV - 85.4fl  
MCH - 28.1pg  
MCHC - 32.9g/dl

ESR - 132mm/ first hour  
Hba1c - 7%  
Serum LDH - 134IU/L  
Serum Iron - 14ug/dl  
Serum Ferritin - 639.5ng/ml  
Serum Total protein - 7.14g/dl  
Serum Albumin - 3.48g/dl  
Reticulocyte count - 1.3%  
Plasma glucose fasting level - 163mg/dl  
Post prandial sugar level - 218mg/dl

**Serum Electrolytes -**

Serum Sodium - 134.0mmol/L  
Serum Potassium - 3.89mmol/L

Serum Chloride - 93.70mmol/L

**Biochemistry**

Serum Urea - 24mg/dl  
Serum Creatinine - 1.09mg/dl

**Right Lower limb Arterial Doppler**

- Subcutaneous Oedema of Right Leg and Ankle
- Diffuse atheromatous changes of right lower limb arteries
- No Evidence of Hemodynamically Significant Arterial stenosis up to the level of Dorsalis pedis

**Provisional Diagnosis**

Right Diabetic foot with Osteomyelitis of calcaneum

**Remedial Diagnosis**

- AURUM METALLICUM
- MERCURIUS
- SEPIA
- SULPHUR
- CLEMATIS

**Prescription:** [10/10/2022

RX AURUM METALLICUM 30C (3 - 3 - 3) \* 1 week

**Follow up**

- 17/10/2022 – bleeding reduced [Aurum met 30C] 1 week
- 24/10/2022 - Healing Granulation tissue observed [same medication continued]
- 15/11/2022 - Patient started to feel better [Placebo \* 1 week]
- 25/12/2022 - wound was healed partially
- 3/5/2025 – Patient was completely healed without any bleeding or slough



Photo clicked on 3/5/2023

### General Management

- Control Diabetes and Hypertension
- Daily wound Dressing
- Maintain Proper diet and Hygiene

### 3. Case Summary

The Patient who had been suffering from hypertension and insulin - dependent diabetes mellitus for 10 years, developed a wound on his right heel, despite trying various treatment, the wound worsened due to his diabetic condition. However, with the Homoeopathic approach, the patient condition improved significantly. Remedy was selected on symptomatology and found it to be useful and effective which increased the chance of cure.

### 4. Conclusion

The Homoeopathic treatment was effective in healing the patient diabetic foot with osteomyelitis. This case study demonstrate the potential of homoeopathy in managing such condition, offering an alternative treatment approach.

### Significance of this Article

This case study is significant as it presents a successful application of homoeopathy in treating a diabetic foot with osteomyelitis, offering an alternative treatment approach for such condition

### References

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### Author Profile

**Kapil Mayavanshi**, 3<sup>rd</sup> year BHMS, Yenepoya Homoeopathic Medical College and hospital, India

**Kunal Mayavanshi**, 3<sup>rd</sup> year BHMS, Yenepoya Homoeopathic Medical College and Hospital, India