

A Case Report on Chronic Varicose Ulcer Treated with Homoeopathic Medicine: An Evidence-Based Study

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Abstract: ***Background:** Chronic non-healing ulcers, particularly those associated with varicose veins, present a significant change in elderly patients and often reduce quality of life. Failure of conventional therapy encourages exploration of complementary approaches such as homoeopathy, which emphasizes individualized treatment based on symptom totality. **Intervention:** A detailed homoeopathic evaluation was conducted considering the patient's physical generals, modalities, and characteristic symptoms. Based on the totality of symptoms, an individualized homoeopathic remedy was prescribed and monitored through regular follow-ups. **Outcome:** The patient demonstrated progressive clinical improvement, including reduction in pain, itching, and bleeding, along with healthy granulation and gradual wound healing. Functional ability improved, enabling better mobility and daily activity. **Conclusion:** This case suggests that individualized homoeopathic treatment may support healing in chronic ulcers unresponsive to conventional therapy. Further controlled clinical studies are recommended to establish the effectiveness of homoeopathy in chronic wound management.*

Keywords: Homoeopathy, Varicose ulcer, Individualized treatment, Wound healing, Case report

1. Introduction

Chronic leg ulcers are commonly associated with venous insufficiency, trauma, and metabolic disorders. The ICD Classification for Non-pressure chronic ulcer of right ankle is L97.31. Homoeopathy is effective in the management of chronic leg ulcers mainly diabetic foot ulcers and varicose ulcers. A combination of both internal and external medicines also showed excellent results in treating this illness⁽⁴⁾. They significantly impair quality of life due to pain, infection risk, and restricted mobility. Chronic ulceration of the lower legs is a relatively common condition amongst adults, and ulcer symptoms usually include increasing pain, friable granulation tissue, foul odour, and wound breakdown instead of healing. A major complication of varicose veins is venous ulcer, which accounts for over 75% of all chronic leg ulceration. Venous ulcers affect around 1% of the population during their lifetime, are notoriously difficult to heal, and cause considerable morbidity and diminished quality of life⁽⁶⁾. Non-healing lower extremity ulcer should have a vascular assessment, including documentation of wound location, size, depth, drainage, and tissue type; palpation of pedal pulses; and measurement of the ankle-brachial index⁽⁷⁾. Since numerous factors lead to lower leg ulceration, it is essential that health professionals adopt an interdisciplinary approach to the systematic assessment of the individual in order to ascertain the pathogenesis, a definitive diagnosis. Conventional management often includes antibiotics, dressings, and sometimes surgical intervention, but recurrence and delayed healing remain common. Homoeopathy, with its holistic and individualized approach, offers an alternative modality focusing on constitutional and local symptoms⁽⁵⁾.

2. Case Presentation

Patient Information:

- **Patient name:** Mr. xxx
- **Age/Gender:** 76 years / Male
- **Occupation:** TNEB worker
- **Marital Status:** Married
- **Religion:** Christian
- **Education:** Diploma in Mechanical Engineering

Case Presentation

A 76-year-old male presented with a painful, non-healing ulcer over the medial aspect of the right ankle for three months. The lesion was characterized by slough, mild bleeding, itching, dark discoloration of the surrounding skin and edema.

Pain was described as bursting in nature, aggravated by touch and scratching and relieved by rubbing. The patient is having a long-standing varicose veins (18 years), hypothyroidism under medication (stopped), and previous surgical intervention for a right lower limb fracture. Prior allopathic management failed to produce satisfactory healing.

Chief Complaint

Patient presented with painful, non-healing wound over the right ankle associated with slough and bleeding for 3 months.

History of Present Illness: The patient is having varicose veins since 18 years, he underwent allopathic treatment but the complaint does not subside and it still persists. Then it started as an ulcer over the right ankle three months before, which progressively worsened following repeated scratching. It developed into two punctured wounds with bleeding, severe pain, itching, and blackish discoloration spreading over the leg. Pain was described as **bursting in nature**, aggravated by scratching and relieved by rubbing.

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Past Medical History

Right lower limb fracture (2018) – Post-Surgical (RTA)
Hypothyroidism – Thyroxine on 100 mg medication (stopped).

Personal History:

Place of birth: Mekkamandapam
Education: Diploma in Mechanical Engineering
Religion: Christian
Nutritional status: Good social status: Good
Diet: Non - vegetarian
No history of adiction

Physical generals:

Appetite: 3 times a day regular
Thirst: Good
Sweat: All over the body on exertion
Desire: Sour foods
Aversion: Salt
Aversion: nothing specific
Intolerance: Nothing specific
Stool: once a day regular
Urine: regular

Mental generals: Anxious.

General Examination:

- **Build:** Stout
- **Complexion:** Fair
- **Odema:** Present in right foot
- **Vital Signs:**
 - BP: 140/90 mmHg
 - Pulse: 76/min
 - Temperature: 98.6°F
 - Respiratory rate: 17 breaths /min
 - Ht: 155cm Wt: 54.3kg
 - BMI: 22.6

Local Examination of Ulcer:

- **Site:** Right ankle
- **Number:** Two punctured ulcers
- **Floor:** Slough present
- **Base:** Indurated and tender
- **Discharge:** Mild bleeding
- **Surrounding Skin:** Hyperpigmented and edema was present

Systemic Examination:

- **Respiratory System:** Normal vesicular breath sounds heard on all lung fields
- **Cardiovascular System:** S1 and S2 sounds heard in all four cardiac areas, No added sounds.
- **Gastrointestinal System:** Normal bowel movements heard on auscultation.
- **Musculoskeletal System:** Normal gait and movements are possible, No deformities.
- **Central nervous system: Higher intellectual functions:** Normal, Patient is conscious and oriented.
- **Cranial nerves:** Intact

Diagnosis: Chronic Venous Ulcer of the Right Ankle

Homoeopathic Totality:

- Bursting pain in ulcer
- Severe pain with sloughing
- Itching and aggravation from scratching
- Relief from rubbing
- Desire for sour foods
- Aversion to salt
- Restlessness
- Chronic venous pathology

Repertorial Chart:

Case repertorisation

| Rep. | Rubric | Puls. (12) | Nux-v. (11) | Bell. (11) | Calc. (10) | Sil. (9) | Lyc. (9) | Chin. (9) | Ars. (8) | Caust. (8) | Sep. (8) | Staph. (7) | Phos. (7) | Lach. (7) |
|---------|---|------------|-------------|------------|------------|----------|----------|-----------|----------|------------|----------|------------|-----------|-----------|
| bogboen | Lower Extremities, amelioration, rubbing | | | | | | | 1 | | | | | 1 | 2 |
| bogboen | Mind, phenomena, restlessness | 3 | 4 | 3 | 2 | 2 | 2 | 3 | 4 | 2 | 2 | 2 | 2 | 3 |
| bogboen | Sensations and Complaints in general, phenomena, bursting, spl... | 2 | 2 | 4 | 4 | 3 | 3 | 2 | 1 | 4 | 4 | 2 | 2 | 1 |
| bogboen | Skin and Exterior body, phenomena, ulcers, itching, in circumf... | 4 | 1 | 1 | | 4 | 3 | | 2 | 2 | 2 | 2 | 1 | 3 |
| bogboen | Taste, phenomena, sour, food in general | 3 | 4 | 3 | 4 | | 1 | 3 | 1 | | | | | |

3. Treatment and Follow Ups

Prescription:

Nov 24, 2023: LYCOPODIUM CLAVATUM 200 / 3 D Early Morning in empty stomach 3 days once.
Cleaning and Dressing done by using: Calendula Officinalis Q and Echinecea Augustifolia Q3.

| SL NO | SYMPTOMS | PRESCRIPTION |
|-----------------|--|---|
| 1)Nov 30 - 2023 | Pain reduced – but present in the ankle region <touch; Itching aggravated by scratching Appetite: Good; Thirst: good Urine: Normal stools: Regular; Restlessness; sleep – Disturbed due to pain | Rx Hypericum 30(2dose 1 hour once in warm water) BF Gun Powder 6x (2-2-2) (AF) External Application– CalendulaOfficinalisQ + EchineceaQ |
| 2)Dec 4 – 2023 | Pain - stinging type Present in right great toe;Appetite: Good; Thirst: good Urine: Normal stools: Regular (ulcer site- painful and reddish) | Lycopodium Clavatum 0/3 3 dose weekly once; Gun Powder 6x(2-2-2) (AF) External Application |

| | | |
|-----------------|--|--|
| | | – Calendula officinalis Q + Echinecea Augustifolia Q |
| 3)Feb 10 – 2024 | Pain in the right ankle as if stinging and burning in nature; Generals are good (Ulcer – healing type no discharge) sleep: Reduced | Gun Powder 6x (2-2-2) (AF) External Application – Calendula officinalis Q + Echinecea Augustifolia Q |
| 4)7 March-2024 | Pain Present; Generals are good; No new complaints | SL 200(3-0-3) in pills Gun Powder 6x (2-2-2) (AF)External Application – Calendula officinalis Q + Echinecea Augustifolia Q |
| 5)3 April- 2024 | Pain reduced; generals are good; ulcer – healed granulation tissue present from periphery to center | Lycopodium Clavatum 0/3 2d/ weekly once; Gun powder 6x (2-2-2) (AF) |

The patient was treated with individualized homoeopathic medicine based on totality of symptoms and constitutional factors. Regular follow-ups showed progressive reduction in pain, slough, bleeding, and eventual healing of the ulcer.

4. Justification of Remedy Selection

Lycopodium Clavatum: Right side of body; Best adapted to persons intellectually keen, but of weak, muscular power. Deep-seated, progressive, chronic diseases; Ulcerates. Abscesses; Violent itching; fissured eruptions; Skin becomes thick and indurated⁽¹⁾. The tissue changes are striking; there is tendency to, necrosis, abscesses, spreading ulcers and great emaciation⁽²⁾.

Hypericum Perfoliatum: The great remedy for injuries to nerves, especially of fingers, toes and nails. Punctured wounds. Intense itching, eruption seems to be under the skin⁽¹⁾. Injury to parts rich in sentient nerves - fingers, toes, matrices of nails, palms or soles - where the intolerable pains shows nerves are severely involved⁽³⁾.

Calendula Officinalis: Pain is excessive and out of all proportion to injury. A most remarkable healing agent, applied locally. Useful for open wounds, parts that will not heal, ulcers, etc. Promotes healthy granulations and rapid healing by first intention.

Echinecea Augustifolia: Eclectic school for this remarkable medicine as a "corrector of blood dyscrasia". Acute auto-infection. Symptoms of blood poisoning, septic conditions generally.

Gun Powder: To prevent sepsis, wound healing, prevents blood poisoning, infected wounds, helps in detoxifying body from the infections⁽¹⁾.

5. Outcome and Results

Significant improvement was noted with: Reduction in Pain and edema; Gradual healing of ulcer, Improved mobility.

Before and after treatment images Clearly demonstrate wound healing.



6. Discussion

Chronic venous ulcers are difficult to manage due to poor circulation and recurrent infection. Homoeopathic treatment aims at stimulating the body’s self-healing mechanism. Individualized remedy selection based on totality showed marked improvement in this case, highlighting homoeopathy’s role as an effective complementary therapy.

7. Conclusion

This case report supports the effectiveness of individualized homoeopathic treatment in chronic venous ulcers. Homoeopathy can be considered a safe and effective therapeutic option for non-healing ulcers.

References

[1] Boericke W. *Pocket Manual of Homoeopathic Materia Medica*.

- [2] Kent JT. *Lectures on Homoeopathic Philosophy*.
- [3] Allen HC. *Keynotes and Characteristics*.
- [4] A review of the effectiveness of homoeopathy in the management of chronic leg ulcers 10.33545/26164485.2021.v5.i1a.285 International Journal of Homoeopathic Sciences
- [5] Agale SV. Chronic leg ulcers: epidemiology, aetiopathogenesis, and management. *Ulcers*. 2013;2013(1):413604.
- [6] Robertson L, Lee AJ, Gallagher K, Carmichael SJ, Evans CJ, McKinstry BH, Fraser SC, Allan PL, Weller D, Ruckley CV, Fowkes FG. Risk factors for chronic ulceration in patients with varicose veins: a case control study. *Journal of vascular surgery*. 2009 Jun 1;49(6):1490-8.
- [7] Bowers, S. and Franco, E., 2020. Chronic wounds: evaluation and management. *American family physician*, 101(3), pp.159-166.