



"Homoeopathic Approach to Gangrene by Evaluating the Role of Lachesis: A Case Report"

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ABSTRACT

Gangrene is a serious medical condition characterized by the death of body tissues due to inadequate blood supply, infection, or underlying health conditions such as diabetes or vascular disorders. It is broadly classified into dry, wet and gas gangrene each with distinct pathophysiology and clinical presentation. Conventional management often involves surgical intervention, antibiotics, and supportive care. However, Homoeopathy offers an alternative approach, aiming to stimulate the body's self-healing mechanisms. This article presents a case report of a 42-year-old female patient who developed gangrene of the left hand over two months, accompanied by severe burning pain. Conventional treatments provided little relief. However, the patient was treated with the homoeopathic remedy Lachesis 200, selected based on the principles of individualization and symptom similarity. Significant improvement was observed, with gradual tissue regeneration and pain relief, ultimately leading to a complete recovery. This case highlights the potential of homoeopathic medicine in managing gangrene, emphasizing the need for further research to explore its efficacy in similar conditions.

Keywords: Gangrene, Lachesis, Homoeopathy.

Introduction

Gangrene is a serious and potentially life-threatening condition that occurs when a significant portion of body tissue dies due to lack of blood supply or a bacterial infection. The condition can affect various parts of the body, including the extremities, internal organs, and muscles. Gangrene arises when the blood supply to a specific area of the body is compromised, leading to tissue death and necrosis.¹

There are several types of gangrene, each with distinct causes and characteristics:

1. Dry gangrene: This form of gangrene typically occurs as a result of reduced blood flow to the affected tissue. Common causes include conditions such as diabetes, atherosclerosis, and peripheral artery disease. The lack of blood flow leads to tissue dehydration, shrinkage, and a dry, blackened appearance. Dry gangrene is usually not associated with bacterial infection.²

2. Wet gangrene: Wet gangrene occurs when the affected tissue becomes infected with bacteria, leading to rapid tissue breakdown and the production of toxins. This form of gangrene is often associated with a significant amount of moisture or fluid in the affected area, which creates an environment conducive to bacterial growth. Wet gangrene can be particularly dangerous due to the risk of systemic infection.²

3. Gas gangrene: Gas gangrene is a severe form of gangrene caused by specific types of bacteria, such as *Clostridium perfringens*, which thrive in the absence of oxygen. These bacteria produce toxins and gas within the affected tissues, leading to rapid tissue destruction and systemic illness. Gas gangrene is characterized by the presence of gas bubbles within the affected tissues.²

The symptoms of gangrene can include severe pain, discoloration of the affected area (such as a blue or black appearance), foul-smelling discharge, fever, and systemic signs of infection. In severe cases, the condition can progress rapidly and lead to septic shock and organ failure.

Gangrene is a medical emergency and requires prompt treatment to prevent the spread of infection and the potential loss of limbs or life. Treatment typically involves addressing the underlying cause, surgical removal of dead tissue (debridement), antibiotic therapy to combat infection, and in severe cases, amputation of the affected limb to prevent the spread of the condition.³

Preventive measures for gangrene include maintaining good blood circulation through regular exercise, managing conditions such as diabetes and atherosclerosis, practicing good wound care, and promptly seeking medical attention for any injuries or infections that could potentially lead to gangrene.

Low haemoglobin levels, a condition known as anaemia, can have several implications in the context of gangrene. Anaemia can result from various factors, including chronic diseases, nutritional deficiencies, and acute blood loss, and it can impact the body's ability to respond to and recover from the effects of gangrene.⁴

Here are a few considerations regarding low haemoglobin levels in the context of gangrene:

1. Impaired Oxygen Delivery
2. Increased Tissue Susceptibility
3. Healing Complications⁴
4. Systemic Effects: Severe anaemia can lead to symptoms such as fatigue, weakness, and shortness of breath, which can complicate the overall management of gangrene and the patient's ability to tolerate necessary medical interventions.

This may involve interventions to address the underlying cause of the anaemia, such as iron deficiency or chronic disease, as well as measures to optimize the body's oxygen-carrying capacity.⁵

Additionally, the management of gangrene in individuals with anaemia may require a comprehensive approach that addresses both the local tissue effects of gangrene and the systemic impacts of anaemia on the body's ability to respond to and recover from the condition.³

It's essential to recognize that gangrene is a serious and potentially life-threatening condition, and anyone who suspects they may have it should seek immediate medical attention to receive appropriate care and treatment.

Case report

On 16 January 2021, a 42 years old female patient presented with blackish discoloration & swelling of fingertips of left hand since 2 months with severe itching burning pain throughout day and night and after mild work swelling turned up around the affected area.

History of Present complaint

A female patient visited for the treatment in January 2021. Patient suffering from blackish discoloration of fingertips of her left hand & swelling especially tips of middle, ring, and little finger, which initially received allopathic treatment without improvement & now wants to take homoeopathic treatment. The patient presented with blackish discoloration on affected area, severe itching, burning pain, breathlessness, and anxiety. Her haemoglobin levels were found to be critically low (4.2gm%), necessitating a blood transfusion.

Past History – History of recurrent cold in childhood.

Family History – Maternal & Paternal side – all healthy & alive.

Physical Generals

Appetite- Normal, 3 chapaties/meal, 2 meals per day.

Thirst- Normal, drinks 2-3 liters of water/day

Desire- N/S

Aversion – N/S

Stool – Once in morning, semi solid, occasionally feels constipated.

Urine- Day – 3-4 times passes urine, Night – 0

Perspiration- Normal, no staining, offensive.

Thermal reaction- Hot

Bathing Habits – Regular & according to season

Vaccination – All done

Weakness- (+++)

Menstruation- Regular cycle, 3-4/25-30days, bleeding normally dark red & clotted.

Obstetric history- G₂ P₂ A₀ L₂ one female child- 15 yrs, H/A, FTND

One male child- 13 yrs, H/A, FTND

Mental Generals

The patient exhibited characteristics such as anxious about her health and family related matters, fear from contagious disease and appears as fastidious by the same reason and keeping things systematically and cleaning her surrounding to avoid infection. She keeps on talking even without asking and frequently changes topic but come back on theme soon. She is having tendency towards envy and loquacity.

General Physical Examination

- Weight- 52 kg., Height-143cms, Jaundice- Not seen, Anaemia- Hb. 4.2gms%, Cyanosis- Nil, Generalized Lymphadenopathy- Absent, Pulse- 98/min., Temperature - 97.8 Degree F, Respiratory Rate - 18/min., B.P.- 130/88 mm of Hg,
- Skin- Black on affected area of the left hand.

Local Examination

There was blackish discoloration of skin of fingers of left hand. There was no discharge coming from affected area. Swelling was present along with severe itching and burning pain.

Investigation findings- Lab reports attached.

Clinical Diagnosis- Gangrene

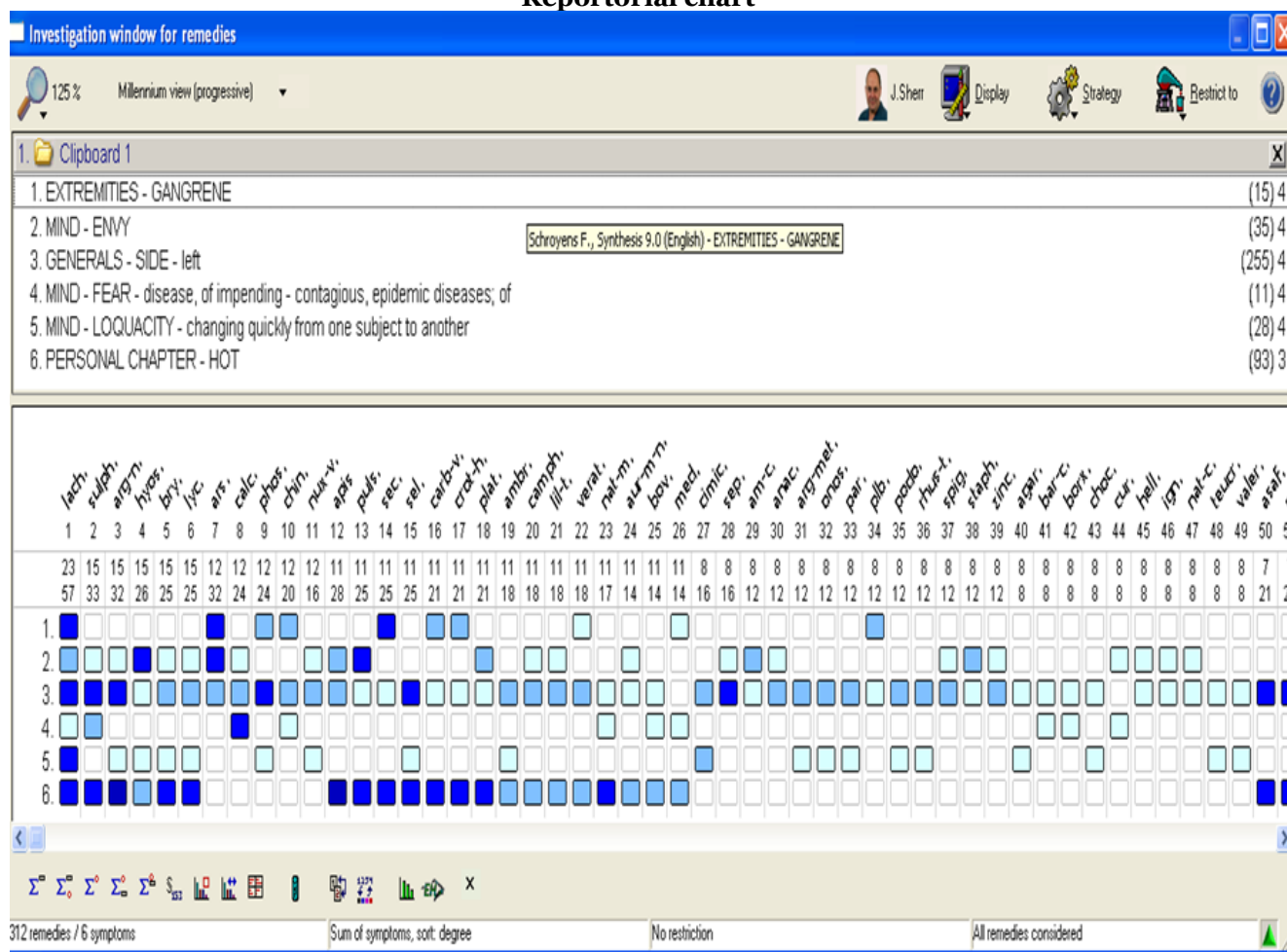
Totality of Symptoms

- Gangrene
- Tendency towards envy
- Complaint in left hand
- Fear from contagious disease
- Very loquacious frequently changes topic from one to another
- Hot thermals

Selection of remedy – According to repertorization from RADAR.

The remedy Lachesis was chosen based on the patient's mental characteristics of envy and loquacity as well as the physical symptoms related to tendency to form syphilitic gangrene on the extremities. Additionally, considering the patient's thermal preferences and predominance of symptoms on the left side.⁶

Reportorial chart



Follow up Sheet

Date	Change in Symptoms	Prescription
16 January 2021	Blackish discoloration & swelling of finger tips of left hand with severe itching burning pain throughout day and night and after mild work swelling turned up around the affected area. Haemoglobin 4.2 g/dl	Lachesis 1M One stat followed by Sac Lac 30 bd for 15
11 February 2021	Haemoglobin comes 5.8 g/dl. Itching, breathlessness, palpitations vanishes. Normal skin started appearing on the finger margins. No swelling found even after working. Gangrene has started decreasing now. No abnormal sensitivity now.	Sac Lac 30 bd for 15 days
27 February 2021	Size of gangrene affected area is decreasing and normal skin has started increasing on the affected part. No abnormal pain or sensation now. No palpitations and breathlessness. All generalities are normal.	Sac Lac 30 bd for 15 days
22 March 2021	Size decreased of affected area. No new complaint, no pain in affected area. Sometime palpitation occurs but that too subside automatically. Haemoglobin improved.	Sac lac 30 bd for 1 month
20 April 2021	Condition is much better than before. Normal skin has started appearing on little and ring finger, slight dried skin left on middle finger. No abnormal sensation. Generalities normal.	Sac lac 30 bd for 1 month
17 May 2021	Very less dried skin left on middle finger, rest condition is normal. No new symptom and abnormal sensation. Generalities normal. Haemoglobin improved – 9.3 g/dl.	Sac lac 30 bd for 1 month



Before Treatment



After Treatment

Reports

LIONS INVESTIGATION CENTER
टी.टी. हॉस्पिटल एण्ड रिसर्च सेंटर प्रा. लि.
 5-A-1, केरावपुरा रोड, तलवली, कोटा
 Website : www.tthospital.in | Email : info@tthospital.in

Registration No. 4842 Place: 42 Y 06/01/2021
 Pt. Name: Dr. PUJA SHARMA Age: Sex: Date:
 Dr: Diagnosis:

*BP 100/90 mmHg
 PC 90 mmHg
 Hb/11.2
 d/o Burning sensation & Pains
 Tab Tidalon 1-1 x 2 15d
 Tab Surber 1-1 x 15d
 maxvide powder 1
 Gp Daxibond 100mg 500 x 15day
 Tab Roobost 500 x 15day
 melnis 1-1 x 15d
 Refer to higher center
 1. OPD Timing : 10:00 AM to 01:00 PM and 06:00 PM to 08:00 PM
 2. Sunday only emergency with prior appointment
 3. Consultation fee valid upto 5 days only Validity upto 12/01/2021
 4. Remarks - डॉ की सलाह के बिना दवाई न खाएं इसके विरुद्ध परामर्श हो सकते हैं समय पर दवाई से और डॉ को दिखाने GET WELL SOON*

LIONS INVESTIGATION CENTER
 Lions Hall, Rajgurun Colony, Behind Ratlam Petrol Pump, Ratlam Ph. : 07412-407788
 Registration No. CL7120-APR-2018

Patient Name : MRS. MANJU RATHORE Age/Sex : 42 Y / F
 Ref. : DR. SELF Date : 03.03.2021
 Reg. No. : LB-030321-104

Investigation	Result	Reference Range
HAEMATOLOGY		
HAEMOGLOBIN (HB)	9.3 gms %	11.5 - 16.5 gms %

Dr. C.S. VERMA, Reg. No. 9440

Note : All pathological test have technical and biological limitation, please correlate clinically as with other investigative findings. A review should be requested in case of any disparity. This report is not valid for legal purposes.

LIONS INVESTIGATION CENTER
 District Hospital Ratlam
 "District Hospital Ratlam"
 CONSULTING ROOM NO. 38
 CLINIC: Dermatology TOKEN NO. 38

OPD Patient's RECORD
 Name: MRS. MANJU RATHORE Sex: F
 Department: Dermatology Age: 42Y
 Date of Registration: 27-03-2021 Date of Visit: 03-03-2021
 Family Name: Ratlam Religion: UNK/OTHER
 Address: SUDAMA PRABHAK RATLAM, MADHVA PRASAD, 2ND A Education: OTHER
 Mobile No.: 9896908888 Father Type: NON-MSC. Prepared By: No-Legal Stamp

Date and Time of initial assessment: 1 Range - 03/03/2021
 Clinical History:
 Examination Findings:
 Investigation: 1 cap Amoxicillin 1000mg 1000mg
 Diagnosis: 2 for Nitrofurantoin 100mg
 Treatment: 3 cap Amoxicillin 1000mg 1000mg
 Follow-up advice: 4 a Antacids + Reglan

Doctor's Name: Signature: *Dr. C.S. VERMA*

27-Jan-21, 12:24 PM

LIONS INVESTIGATION CENTER
 Lions Hall, Rajgurun Colony, Behind Ratlam Petrol Pump, Ratlam Ph. : 07412-407788
 Registration No. CL7120-APR-2018

Patient Name : MRS. MANJU RATHORE Age/Sex : 42 Y / F
 Ref. : DR. SELF Date : 03.03.2021
 Reg. No. : LB-030321-104

Investigation	Result	Reference Range
HAEMATOLOGY		
HAEMOGLOBIN (HB)	9.7 gms %	11.5 - 16.5 gms %
BLOOD GROUPING & Rh FACTOR	"ABO" Group	"O"
RH(D) FACTOR	NEGATIVE	

Dr. C.S. VERMA, Reg. No. 9440

Note : All pathological test have technical and biological limitation, please correlate clinically as with other investigative findings. A review should be requested in case of any disparity. This report is not valid for legal purposes.

Time : 3:45 PM
 6-7 Jail Road, (Near Civil Hospital) RATLAM (M.P.)
 Lab : 07412-406015, 221255 Mob : 9897205846

Discussion

The above case describes a case study of a female patient suffering from gangrene in her left hand fingers, who sought homoeopathic treatment after experiencing worsening symptoms despite receiving allopathic treatment for 2 months. The patient presented with blackish discoloration, severe itching, burning pain, breathlessness, and anxiety. Her haemoglobin levels were found to be critically low, necessitating a blood transfusion. The patient exhibited characteristics such as anxiety, fear of contagious diseases, and a tendency

towards envy and loquacity. The homeopathic remedies **Lachesis 1M** was prescribed based on the totality of symptoms. Subsequent follow-ups showed improvement in the patient's condition, with a decrease in gangrene affected area and improvement in haemoglobin levels over time. The treatment involved the administration of *Sac Lac 30 bd* in each follow-up. Overall, the homoeopathic treatment resulted in significant improvement, with the patient experiencing decreased gangrene affected area, normalization of skin, and relief from symptoms such as itching, palpitations, and breathlessness & improvement in haemoglobin values from 4.2 to 9.3 g/dl.

As per literature, *Lachesis* is used to treat a variety of conditions, including erysipelas and gangrenous affections, where the affected area may have a mottled, purplish appearance.⁶

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