

CASE REPORT

Homoeopathic treatment of Heloma durum-Case Report

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ABSTRACT

Heloma durums also known as corns are areas of hard, thickened skin which commonly occur on the feet, and can cause pain, discomfort, and they also tend to reoccur. Two cases of plantar heloma durums illustrated here were treated with same medicines with similar genetic make-up, that is, father and daughter. Father received the medicine after case taking whereas 15 years later, the daughter received homoeopathic treatment given to the father. Both tried other modes of treatment including invasive procedure before being successfully cured in a short span of time with homoeopathic treatment protocol. Here, the same treatment cured both father and daughter, which indicates that the same homoeopathic medicine is effective, in similar genetic make-up for a given disease (genetic similitum). Several studies show the potential of homoeopathic medicine to regulate gene-expression in animal and plant models. It seems that the present treatment is also acting in the same fashion by regulating the gene responsible for predisposing corn formation.

Keywords: Corn, Gene-expression, Genetic similitum, Heloma durums

INTRODUCTION

Heloma durum or corn (clavi) is acquired areas of thickened skin (keratosis) that appear over sites of repeated or prolonged trauma to the epithelium. These lesions arise because of pressure, friction, and shearing forces of bone (through the overlying skin) against adjacent digits, metatarsal heads, or footwear. They are associated with poorly fitting footwear, underlying anatomic deformities, and high levels of activity. The formation of the center (nucleus, radix) of corn is secondary to vascular changes, and fibrosis underlying the point of maximum stress. There is marked hyperkeratosis of the stratum corneum overlying an epidermis that has otherwise the same thickness as the adjacent skin.^[1]

Corns are a common foot problem and surveys have indicated that between 14% to 48% of people

suffer from them. Many of these will seek podiatry treatment; however, there is little evidence to indicate which current treatments in conventional medicine provides a long term resolution.^[2] Disorders of cornification are a group of diseases that share abnormalities in the manufacture or desquamation of corneocytes.^[3]

A hard lesion in the plantar area is kept under a larger term plantar keratosis which includes warts.

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Surgical treatment is usually not indicated since the rate of recurrences is as high as with the conservative therapy, and the resulting scars may lead to the same complaints.^[4] Conventional treatment methods are usually invasive, have low efficacy, and need long recovery periods.^[5]

CASE STUDIES

Case No 1

A male patient aged 36 years, forest ranger by profession, presented with multiple painful corns on the plantar aspect of both feet at our OPD March 3, 1999.

Presenting complaints

Painful corns, four corns on the plantar aspect of the left foot and two on the right foot. Aggravation of pain on standing and walking, more so walking bare foot on the floor. The continuous pain of the stitching character.

History of presenting complaints

Corns were present since about 6 months, for which he was taking analgesics, local application of Salicylic acid, and had already taken the opinion of a surgeon, who had advised him surgery followed by 4 weeks of medication, and rest for healing the wound as a result of surgery, with a word of caution, that, it may reoccur. This prompted him to seek homeopathic consultation. Due to his occupation, he had to continuously walk in the forest in difficult terrain, therefore, frequently took analgesics to control pain.

Past history

- Illness/disease: Nothing significant
- Surgical treatment: Single corn removal in the past
- Medical treatment: Analgesics, corn cap
- Causation: Walking with ill-fitting heavy shoes.

Family history – No specific history except father being hypertensive.

Personal history

- Sleep/dream: Nothing significant
- Urine/urinary tract: Nothing significant
- Bowel: Regular
- Thirst: Adequate.

Constitution: Medium built.

Height: 5 feet 3 inches, weight: 71 kg.

Relation to heat and cold: Ambient.

Mentals: Well behaved, yielding gentleman.

Physical general: Desire/aversion: Nothing significant.

Personal habit: Nothing significant.

Systematic examination: Nothing significant.

Local examination: Corn tender on direct pressure, no signs of discharge or inflammation, striae on the corn.

Diagnostic Criteria

Plantar warts are often similar to calluses or corns, but they are differentiated by skin striations. Skin striae go around plantar warts; if the lesion is not a plantar wart, the striations continue across the top layer of the skin. Plantar warts tend to be painful on the application of pressure from either side of the lesion rather than direct pressure, unlike calluses (which tend to be painful on direct pressure instead).^[6] In the present case, local examination, and clinical presentation indicates the case to be of heloma durum.

Repertorisation

With the help of Kent's Repertory, the case was repertorised with the following rubrics:

- Extremities; corns; painful
- Extremities; corns; painful; aching
- Extremities; corns; painful; stitching, stinging
- Generalities; intoxication, after; medicaments [Table 1].

Review of Materia Medica

Sulphur

Pain in the corns (27th day). About 4 p.m., and all the afternoon, constant pain in the corns, as if the

Table 1: Repertorization chart

	Sulph	Ant-c	Sep	Sil	Calc	Calc-s	Ran-s	Rhus-t	Agar	Alum	Bry	Calc-sil	Petr	Bov
Marks obtained	9	8	8	8	8	7	7	7	6	6	6	6	6	5
Symptoms covered	3	3	3	3	2	2	2	2	2	2	2	2	2	2
Extremities; corns; painful	4	4	4	4	4	3	4	3	3	2	2	3	3	2
Extremities; corns; painful; aching	1	1	1	1										
Extremities; corns; painful; stitching, stinging	4	3	3	3	4	4	3	4	3	4	4	3	3	3
Generalities; intoxication, after medicaments														

boot pressed on them, and frequent alternation of a drawing penetrating pain, combined with the feeling of stiffness, now in the joints of the left great toe, now in the right ankle-joint, now in the ligamentous connection of the right ankle, with the metatarsal bone (at rest and when moving), (1st day). Corns painful, as if pressed by a tight shoe. Pains in the corn of the right little toe (127th day). Frequent violent sticking in the corns. Sticking in corn, at night, in bed. Violent stitches in the corn, in the evening, in bed, and several evenings. Sticking burning in corn, in a wide shoe.^[7]

Antimonium crudum

Large horny places on the skin of the soles of the feet, close to where the toes commence, which pained like corns, and always returned after having been cut out. Great sensitiveness of the soles of the feet, when walking, especially upon the stone pavement, for a long time (after 7 days).^[7]

Treatment

Sulphur 200 single dose was given in the morning, next day onward *Antimonium crudum* 30 TDS for 7 days.

RESULTS

The patient did not turn up after 7 days, and it was assumed that the patient had left treatment. But, several months later the patient came back for another minor ailment, on this consultation he was enquired about his corns, this is when he reported that the corns became painless the very next days after taking Sulphur and all of them disappeared in 10 days time. In a recent conversation, the patient confirmed that the corn did not reoccur in the past 16 years.

Case No 2

After 15 years, the same patient brought his daughter, aged 18 years on 12 September 2013 with single painful corn in plantar aspect of left foot with sign of desquamation due to application of corncap [Figure 1].

Before coming to us, she had tried several treatment options in another city including corncap tapes, and Homoeopathy. Application of corncap reduced the size for a short period of time, but, it grew back after sometime. She had received homoeopathic treatment for about 4 months, without any relief, the patient could not give the details about previous homoeopathic medication, but, was assertive that the detailed case interview was done before starting the treatment. Assuming that she might have already received the commonly indicated medicine from the previous homoeopath, we once again prescribed the same medication given to her father 15 years ago [Figure 1].

Treatment

Sulphur 200 single dose was given in the morning, next day onward *Antimonium crudum* 30 TDS for 7 days followed by placebo [Table 2].

RESULTS

On 23rd September 2013, the patient reported no pain, and 90% of the corn had resolved, on 10th October 2013, the corn had completely disappeared while on placebo [Figure 2].



Figure 1: Corn before the treatment

Table 2: Homoeopathic treatment and outcome

Treatment table with follow up				
Date	Symptoms	Medicine	Potency	Dosage
12 th September 2013	Painful Heloma Durum (corn) plantar aspect left foot	<i>Sulphur</i>	200C	Single dose was given in the morning
13 th September 2013		<i>Antimonium crudum</i>	30C	3 times a day for 7 days
23 rd September 2013	No pain in Heloma Durum (corn), size reduced to 10%	Placebo		3 times a day for 15 days
10 th October 2013	Corn completely resolved			



Figure 2: Corn completely disappeared after the treatment

DISCUSSION AND CONCLUSION

Heloma durum (corn) a so called surgical disease with sycotic miasm in the background, with high chances of recurrence, has no answer in the modern medicine other than surgical removal. Surgical removal is not only painful but, also requires immobility for 4–6 weeks till the wound heals up. Both the cases discussed above had tried other treatment modes before taking the above homoeopathic treatment protocol.

Pathogenetic trails (homoeopathic proving) of *Sulphur* and *Antimonium crudum* has shown a definitive role in thickening of the skin (keratosis), and also that it adapts well to persons constitutionally having thick skin. Determination of constitution in homoeopathic case taking tries to ascertain the genetic make-up of an individual or diseased part, and choosing a medicine picture of similar genetic make-up from the Materia Medica derives the right similimum, effecting a cure. Is this also true for hereditary diseases?

In above mentioned cases, Case no. 1 received medication after case taking, and Case no. 2 daughters of Case no. 1 received repetition of medication received by case no. 1 that is., her

father without case taking, both cases cured in short span of time. Here the same treatment cured both father and daughter, which indicates that the same homoeopathic medicine is effective, in similar genetic make-up for a given disease (genetic similimum).

Several studies show the potential of homoeopathic medicine to regulate gene-expression in animal and plant models.^[8,9] It seems the present treatment protocol is also acting in the same fashion by regulating the gene responsible for predisposing corn formation. More detailed study both clinical and laboratorial is needed to ascertain the role of genetic similimum in treating incurable diseases.

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Conflicts of Interest

There are no conflicts of interest.

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प्रकरण शृंखला

हेलोमा डुरुम

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शल्यक्रिया विभाग, राजकीय होम्योपैथिक चिकित्सा महाविद्यालय, ¹भेषजी विभाग, नारायण श्री होम्योपैथिक चिकित्सा महाविद्यालय, भोपाल, मध्य प्रदेश, भारत

सार

हेलोमा डुरुम जिन्हें गोक्षुरु/गोखरु/टेंड/टेक के नाम से भी जाना जाता है, सख्त व मोटी हो चुकी त्वचा के हिस्से हैं जो प्रायः पैर के पंजों में होते हैं और इनसे दर्द व तकलीफ हो सकती है एवं ये प्रायः दोबारा भी हो जाते हैं। यहां स्पष्ट किए गए पैर के पंजे के हेलोमा डुरुम के दो प्रकारों का उपचार समान औषधियों के साथ सदृश आनुवंशिक रचना वाले दो व्यक्तियों, जो कि पिता व पुत्री थे, में किया गया। पिता को प्रकरण लेने के बाद औषधि मिली जबकि 15 वर्षों के बाद, पुत्री को वह होम्योपैथिक उपचार नयाचार मिला जो पिता को दिया गया था। दोनों ने होम्योपैथिक उपचार नयाचार से अल्पावधि में ही सफलतापूर्वक पूरी तरह ठीक हो जाने से पहले, अन्य उपचार विधाओं, जिनमें प्रवेशी कार्यविधि शामिल है, का प्रयोग करके देखा था। यहां, पिता और पुत्री दोनों को समान उपचार ने पूरी तरह ठीक कर दिया, जिससे यह संकेत मिलता है कि वही समान होम्योपैथिक औषधि, रोग विशेष के लिए सदृश आनुवंशिक रचना वाले व्यक्तियों में प्रभावी है (जेनेटिक सिमिलिमम)। कई अध्ययन जंतु एवं पादप निदर्शों में जीन-अभिव्यक्ति को नियंत्रित करने में होम्योपैथिक औषधियों का सामर्थ्य दर्शाते हैं। यह प्रतीत होता है कि प्रस्तुत उपचार नयाचार भी गोक्षुरु के निर्माण हेतु पूर्वानुकूलता के लिए उत्तरदायी जीन को नियंत्रित कर समान विधि से कार्य कर रही है।

मुख्य शब्द: गोक्षुरु / गोखरु / टेंड / टेक, जीन-अभिव्यक्ति, जेनेटिक सिमिलिमम, हेलोमा डुरुम

Tratamiento homeopatico de heloma durum -Reporte de un caso

RESUMEN

Los helomas duros, también conocidos como callos, son zonas de piel dura, engrosada que suelen presentarse en los pies y causar dolor y molestias. Muestran una tendencia a recidivar. En este artículo, se presentan dos casos de helomas duros plantares tratados con el mismo medicamento en personas con una genética similar, es decir, padre e hija. El padre había recibido el medicamento después de la toma del caso, mientras que, 15 años después, la hija recibió el mismo protocolo terapéutico homeopático administrado al padre. Ambos pacientes se habían sometido a otros tipos de tratamiento, incluyendo procedimientos invasivos, antes de ser curados satisfactoriamente en poco tiempo con el protocolo terapéutico homeopático. En este caso, el mismo tratamiento curó al padre y a la hija, lo que indica que el mismo medicamento homeopático es eficaz en condiciones genéticas similares de una determinada enfermedad (*similimum* genético). Varios estudios muestran el potencial de los medicamentos homeopáticos de regular la expresión genética en modelos animales y vegetales. Al parecer el presente protocolo terapéutico también actúa de la misma forma regulando el gen responsable de la predisposición a la formación de callos.