

Benign prostatic hyperplasia: An evidence-based case report treated with Homoeopathy

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Abstract

Benign prostatic hyperplasia (BPH) is commonly seen in men above the age of 50 years and its incidence approaches 75–80% in men above 80 years. It is one of the frequent reasons for elderly men undergoing surgery. BPH symptoms range from least voiding difficulties to urinary retention and renal failure. In this case, treated with *Causticum*, both subjective symptoms and prostate size were assessed post treatment. This case shows the usefulness of this medicine on subjective and pathological parameters.

Keywords: Benign prostatic hyperplasia, *Causticum*, Homoeopathy, Individualization, Repertorization

INTRODUCTION

The prostate is an accessory gland of the male reproductive system.^[1] Benign prostatic hyperplasia (BPH) is a nonneoplastic tumor-like enlargement of the prostate. It is commonly seen in men above the age of 50 years and its incidence approaches 75–80% in men above 80 years. It is rarely a life-threatening condition but has a significant effect on individual's quality of life in varying degrees.^[2] However, symptomatic BPH producing urinary tract obstruction and requiring surgical treatment occurs in 5–10% of cases only.^[3]

Some experts believe that a family history of the condition increases a man's risk of developing BPH. Obesity and diabetes are the factors that potentially increase the risk of developing BPH and Lower Urinary Tract Symptoms (LUTS), whereas increased physical activity decreases the risk of BPH.^[4] A recent study claims that increased air pollutants have a potential effect on BPH.^[5] Obstructive symptoms include hesitancy, poor flow, intermittent stream, dribbling, sensation of poor bladder emptying, episodes of near retention of urine etc. Irritative symptoms such as frequency, nocturia, urgency, urge incontinence, and nocturnal incontinence may occur. Low flow rate and high voiding pressure are the consequence of bladder outflow obstruction.^[6]

Among treatment option for BPH-watchful watching approach is adopted when symptoms are mild and not affect the daily

activities. Pharmacological intervention undertaken when there is increased resistance to the flow of urine through bladder neck and compressed prostatic urethra. Surgical intervention is considered in case of severe symptoms and in complications such as urinary retention, renal failure and infection.^[7]

Homoeopathy has also a good treatment option for patients suffering from BPH. Research study by Reddy *et al.* showed the efficacy of homoeopathic medicines such as *Pulsatilla nigricans*, *Thuja occidentalis* in the treatment of BPH in elderly men.^[8] Clinical study by Gupta *et al.* on BPH shows the efficacy of homoeopathic drugs such as *Lycopodium*, *Pulsatilla*, *Sulphur*, and *Calcarea carb.*^[9] Other scientific works on BPH, a significant contribution made by Oberai *et al.*,^[10] Dole *et al.*,^[11] Hati *et al.*,^[12] and Weinstein.^[13] All these scientific works proved the efficacy of homoeopathic medicines in the treatment of BPH. The health system segment of University of Michigan, also says that *Chimaphila*, *Pulsatilla*, *Apis*, *Causticum*, *Clematis*, *Sabal*, *Staph*, and *Thuja* are good for treatment of BPH.^[14] Recently, Central Council for Research in Homoeopathy has undertaken a work on BPH titled "An

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open randomized multicentric placebo controlled clinical trial on Homoeopathic therapy for lower urinary tract symptoms in men with BPH.^{29[15]}

CASE REPORT

A male, aged 53 years of average height and moderate built attended outpatient department with complaint of unsatisfactory micturition, feeble urine flow for last 1½ years with sensation of heaviness and fullness of lower abdomen (hypogastric region) and perineum, frequent urination in the evening hours and amelioration (>) from passing urine. He also used to get recurrent attacks of cold, especially in the winter for last 2–3 years. No other major complaints were reported by the patient.

It was a known case of prostatomegaly as the patient was already under treatment of an allopathic doctor with USG report showing the size of prostate 43.4 cc with residual urinary volume 130 cc and left renal cyst. Other investigations such as Prostate Specific Antigen (PSA) level and urine (R/E) were

normal. After 1 month of treatment as there was no symptomatic improvement, patient was advised for surgery. Significant morbidity and fear of surgical intervention, patient did not undergo surgery and came to us for homoeopathic treatment.

Figure 1: Repertorization table

UNIQUE SONOGRAPHY & X-RAY CLINIC
Jagannath Bari Road, Bidurkarta Chowmuhani, Agartala- 799001

CONSULTANT
Dr. L. K. Sinha
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MR 53 YR M
Refd----- MBBS (KOL) DTCD (KOL).

ULTRA- SONOGRAPHY OF WHOLE ABDOMEN

LIVER is normal in size and homogenous in echo-pattern. Intra-hepatic biliary radicles are not dilated. No focal lesion is seen in liver.
 CBD- is normal in caliber. P V – is normal in caliber.
GALL BLADDER
 Gall bladder is distended. No calculi or SOL is seen in gall bladder. Gall bladder wall is normal.
PANCREAS
 Pancreas is normal in size and homogenous in echo-pattern. No focal lesion is seen in pancreas. MPD is not dilated.
KIDNEY
 Right kidney – is 8.97 CM.
 Left kidney – is 9.48 cm
 Both kidneys are normal in size, shape and positions. A small cortical cyst is seen in left kidney.....Normal cortico-medullary ratio and differentiation are seen in both kidneys.
SPLEEN
 Spleen is normal in size and homogenous in eco-pattern. Splenic vessels are not engorged.
URINARY BLADDER – Wall thickness and contour are normal..No calculi or SOL is seen in urinary bladder..
PROSTATE- is enlarge in size and volume.- 43.4 cc. Normal homogenous echopattern is seen.
 Residual urine volume- (R U V)--- 130 CC
 No free fluid is seen in peritoneal cavity. Both iliac fossa are normal..

IMPRESSION---- U S G of whole abdomen reveals prostatomegaly with left renal cortical cyst..

Vineet
6/5/14
Dr. L. K. Sinha.
MD. Radio Diagnosis

Thanks for kind referral.

Figure 2: Ultrasonography of whole abdomen before treatment

Table 1: Miasmatic analysis			
Rubric	Miasm(s)	Chapter	Page number
Fastidious	No classification	Mind	42
Mildness	Psora	Mind	62
Sympathetic	No classification	Mind	79
Company, desire for, alone, while aggravation	Psora	Mind	11
Travel, desire to	Psora	Mind	82
Dreams, business of the day	Psora	Sleep	1154
Cold in general aggravation	Psora	Generalities	1230
Winter, in	Psora, latent psora	Generalities	1264
Desires salt things	Psora, syphilis	Stomach	440
Scanty sweat	No classification	Perspiration	1202
Urination, unsatisfactory feeling as if urine remained in urethra	No classification	Bladder	596
Urination, feeble stream (slow)	No classification	Bladder	592
Urination, frequent, evening	Psora, sycosis	Bladder	592
Enlargement	Sycosis	Prostate gland	603
Swelling	Psora	Prostate gland	604
Fullness, sensation of urination after	Psora	Bladder	581
Heaviness	No classification	Prostate gland	603

Patient was stable, well-dressed, very mild, and gentle in talking, does not like to be alone. He likes to do things in perfect orderly manner, sympathetic toward suffering of others, and loves to travel. His appetite is good and has desire for salt and spicy food with moderate thirst and clean, moist tongue. Urine is mild offensive, unsatisfactory, unfinished sensation, passes 9–12 times a day of moderate quantity with more urgency felt in the evening. Bowel movement is regular with scanty, nonoffensive sweat over face and palms. Sleep is sound, refreshing with frequent dream of daily activities. Patient is extremely chilly, prefers rainy, wet weather, and aggravation in winter.

Patient suffered from typhoid in the year 1994, with allopathic treatment he recovered well. No history of major illnesses among family members. Patient by occupation a teacher, of middle-income group has habit of drinking tea (1–2 cups/day). On systemic and local examination, nothing specific abnormality observed. The patient treatment and follow-up of the case mentioned in Table 1.

While analyzing the case, general and particular symptoms were classified into common, uncommon, and evaluated as per their merit. Characteristic mentals, physical generals, particulars, and diagnostic symptoms were considered for erecting the totality. Since the case has many generals,

so Synthesis Repertory (Version 9.1)^[16] is selected for repertorization purpose. Miasmatic analysis was done with the help of repertory of miasm [Table 2] which shows dominance of psoric miasm.^[17] After repertorization with the help of RADAR (Rapid Aid to Drug Aided Research, Archibel Homoeopathic Software. Belgium). 10 by Archibel Homoeopathic software,^[18] *Sepia*, *Spongia*, *Sulphur*, *Causticum*, *Silicea*, *Medorrhinum*, *Phosphorus*, *Natrum mur* are the leading drugs in this case [Figure 1]. The fastidiousness, sympathetic nature toward others suffering, rainy weather amelioration, attack of cold in the winter season, and salt desire were so prominent in this patient that after consulting materia medica^[19-21] and considering miasmatic background and other symptoms, *Causticum*, a deep acting, antipsoric medicine was selected for this case. On further study of mental symptoms of *Causticum* from authentic source books, it is found that *Causticum* patients are timid, nervous, and afraid of darkness, does not like to be alone.^[22] There is fear that something is going to happen with profound anxiety.^[23] Since the heaviness felt in the perineum is as usually an indication of prostate enlargement, so the rubric “Prostate gland-Heaviness” also considered from Kent’s Repertory,^[24] where a handful number of drugs are mentioned including *Causticum*. Therefore, it was justified to prescribe

Table 2: Follow-up schedule

Date	Indications for prescription	Medicine with doses, repetition
August 19, 2014	No change of complaints. Fullness and heaviness of hypogastric region still persist with feeble flow of urine. There is mild body ache for 2 days following exertion from some domestic work	<i>Causticum</i> 200C, twice daily for 2 days followed by placebo for 10 days
September 09, 2014	There is some improvement of fullness and heaviness in hypogastric region for last 10 days. Flow of urine is still troublesome, but slight improved than the first visit. No any other specific complaints	Placebo for another 15 days
September 29, 2014	Although there is steady improvement of complaints, but they still troublesome for the patient with frequent urination in evening hours viz., 5-6 times. All other parameters are normal	<i>Causticum</i> 1M; once daily for 2 days followed by placebo for 1 month
October 18, 2014	Frequency of urination is less viz., 2-3 times in the evening; fullness and heaviness is much improved for last 15 days. Offensiveness of urine still present. Patient advised for USG of whole abdomen to corroborate with clinical findings	Placebo twice daily for 15 days
November 15, 2014	USG of whole abdomen done on November 11, 2014, shows decrease in size of prostate gland viz., 34.2 cc. With residual urinary volume of 110 cc. No any other specific complaints observed during this visit. Flow of urine is moderate and satisfactory	Again placebo, twice daily continued for 15 days
December 02, 2014	Congestive headache for last 2 days from exposure to cold wind with throbbing in temporal region; > from external pressure and < from light, lying down; thirstless. ^[20,21] Urinary troubles are improving	<i>Belladonna</i> 30C, thrice daily for 2 days
January 01, 2015	Complaint of headache was improved within 3 days of taking medicine, prescribed on last visit. Heaviness and fullness, flow of urine quite improved; patient is doing well except unfinished, unsatisfactory urination still persisting	<i>Causticum</i> 1M; one dose for 1 day followed by placebo for 1 month
January 31, 2015	Patient doing well; fullness of hypogastric region is completely over; satisfactory urination for last 10-15 days. Again advised for USG of lower abdomen for assessment of prostate size. Offensiveness of urine is less and insignificant	Placebo, twice daily for 15 days
February 17, 2015	USG of lower abdomen done on February 09, 2015, shows decrease in size of prostate gland viz., 24.76 cc. with residual urinary volume of 65 cc. Strikingly there is no renal cyst in the USG report. No any other specific new or old complaints, patient is doing well. He is advised to report after 15 days	Placebo, twice daily for 15 days
March 26, 2015	No new complaints; patient is healthy and doing well. He is advised to attend OPD if any complaint recurs or for any acute illness	Placebo, twice daily for 1 month
April 28, 2015	Patient is doing well; urinary troubles are better	Placebo, twice daily for 7 days

USG: Ultrasonography; OPD: Outpatient department

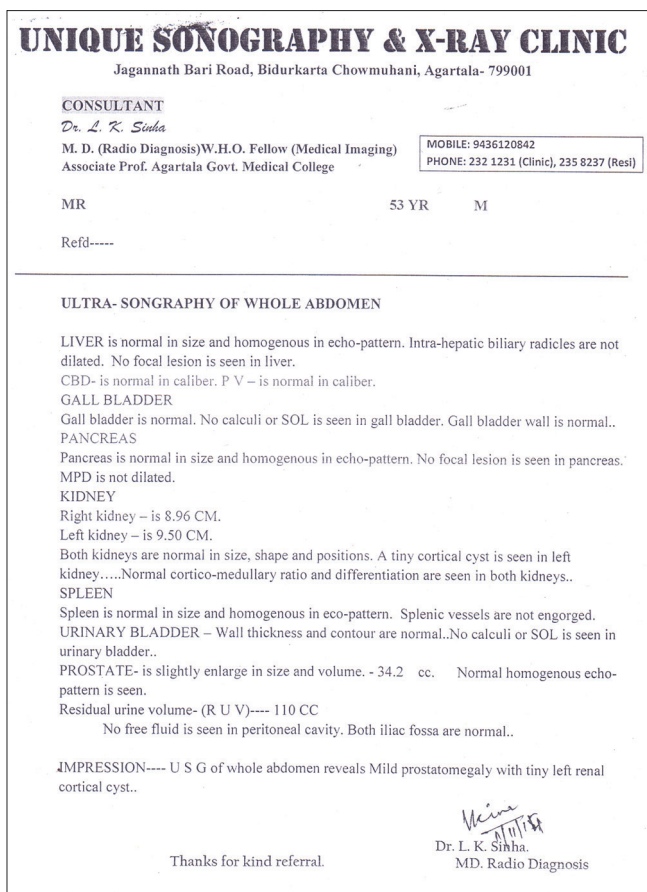


Figure 3: Ultrasonography of whole abdomen during treatment

Causticum 30C, twice daily for 3 days followed by placebo for 10 days in its first visit on August 04, 2014. The follow up details of the patient are given in Table 2.

DISCUSSION AND CONCLUSION

Medical management should be used judiciously in all patients with BPH, with proper individualization. Clinical presentation, proper history, and laboratory investigations help to identify whether one needs urgent surgical or medical treatment or not. A homoeopathically recorded case including detailed history of present illness, family history, history of previous similar illness, and previous interventions is warranted. In this case, all subjective symptoms were improved after taking the medicine. There is also reduction in size of prostate gland from 43.4 cc to 24.76 cc and that of residual urinary volume from 130 cc to 65 cc within a time period of 5–6 months. Other major positive outcome of this case study is that the patient did not have any attack of cold in last winter or any other problem except acute attack of congestive headache. The renal cyst (although tiny) is also disappeared during treatment [Figures 2-4]. The last prescribed *Causticum* 1M potency helped the patient to overcome the remnant of urinary troubles and since then patient was doing well for almost 4 months and last reported on April 28, 2015, without any significant trouble, further assessment could not be done.

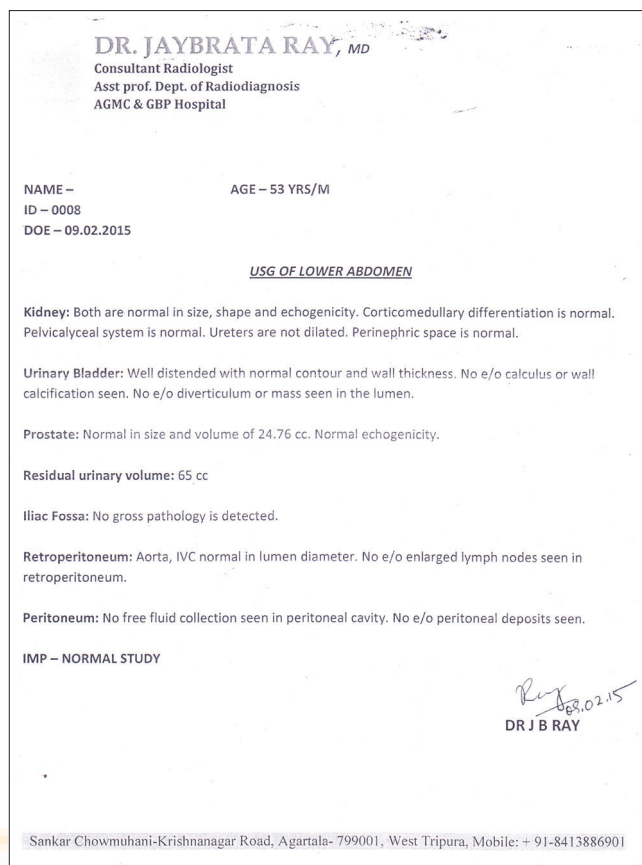


Figure 4: Ultrasonography of lower abdomen after treatment

As described earlier, different scientific works published in reputed Indian, International journals have found that homoeopathic medicines are effective in BPH; this case too improved with *Causticum* once again shows the efficacy of homoeopathic medicines in BPH. This case also shows the significance of individualization in homoeopathy. Homoeopathy considers “man as a whole” and thus this patient too improved subjectively and as well as there was marked decrease in prostate size. Homoeopathic therapeutics may be useful in cases where absolute surgical intervention is not warranted. Thus, the aim of homoeopathic treatment is not only to treat BPH or other troubles but also to address its underlying cause, miasmatic background, individual susceptibility, etc. Although study of a single case does not constitute a strong opinion, but the outcome is encouraging.

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Conflicts of Interest

None declared.

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बिनाईन प्रोसटैटिक हाइपरप्लेसिया: एक साक्ष्य आधारित केस अध्ययन

बेनाईन प्रोसटैटिक हाइपरप्लेसिया (बीपीएच) एक ऐसी नैदानिक स्थिति है जिसके लिए कई बुजुर्ग पुरुष शल्य चिकित्सा करवाते हैं। बीपीएच के लक्षण मूत्रत्याग करने में कठिनाई से लेकर मूत्र प्रतिधारण और वृक्कीय विफलता है। इस केस में, कॉस्टिकम से उपचार किया गया और व्यक्तिपरक लक्षणों और प्रोस्टेट के आकार दोनों का उपचार के बाद आकलन किया गया। यह केस व्यक्तिपरक व रोगजनक मापदंडों पर औषधि की प्रभाविकता दर्शाता है।

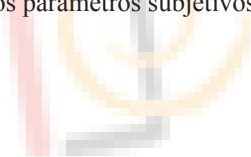
Hyperplasie bénigne de la prostate: une étude de cas reposant sur des preuves

Extrait

L'hyperplasie bénigne de la prostate (HBP) est l'une des raisons les plus courantes pour lesquelles les hommes âgés subissent une opération. Les symptômes de l'HBP vont de simples difficultés à uriner à la rétention urinaire et l'insuffisance rénale. Dans le cas présent, où Causticum a été prescrit, tant les symptômes subjectifs que la taille de la prostate ont été évalués après le traitement. Ce cas montre l'efficacité de ce médicament sur des paramètres subjectifs et pathologiques.

Hiperplasia prostática benigna: Un estudio de caso basado en la evidencia

La hiperplasia prostática benigna (HPB) se observa con frecuencia en hombres mayores de 50 años y su incidencia se aproxima al 75-80% en hombres mayores de 80 años. Es una de las razones frecuentes de los hombres mayores sometidos a cirugía. Los síntomas de la HPB van desde dificultades de micción hasta la retención urinaria y la insuficiencia renal. En este caso tratado con *Causticum*, se evaluaron tanto los síntomas subjetivos como el tamaño de la próstata después del tratamiento. Este caso muestra la utilidad de este medicamento tanto en los parámetros subjetivos como patológicos.



Benigne Prostatahyperplasie: Ein evidenzbasierter Fallbericht

Benigne Prostatahyperplasie (BPH) wird häufig bei Männern über dem Alter von 50 Jahren gesehen und ihre Häufigkeit nähert sich 75-80% bei Männern über 80 Jahren. Es ist einer der häufigsten Gründe für ältere Männer, die sich einer Operation unterziehen. Die BPH-Symptome reichen von geringsten Entleerungsschwierigkeiten bis zu Harnretention und Nierenversagen. In diesem Fall, behandelt mit *Causticum*, waren sowohl die subjektiven Symptome als auch die Prostatagröße verbessert. Dieser Fall zeigt die Nützlichkeit dieses Arzneimittels für subjektive und pathologische Parameter.