

A CASE OF MAMMARY CANCER

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Mrs. Laharchand Sethia, aged 50, Woollen Press Building (Oswal Jain), Bikaner.

Mrs. Sethia an old, congenital asthmatic called me for consultation. Besides her asthmatic troubles, she complained of a hard swelling in her right breast. On examination, I found a hard lump, oval, but irregular in shape. She also complained of burning pain in the affected part, which aggravated on pressure. A little pus and sanious fluid oozed out, and soiled her inner garment. The pain and discharge together with her asthmatic trouble, she assured me, aggravated late at night. She was irritable, full of anguish and anxiety. I prescribed Arsenic A. 200, then 1000 for some days. She was much relieved of her burning pain and her bronchial asthma, but there seemed to be no appreciable change as to her mammary affection. Being the family physician and a close associate of the family, I grew apprehensive, seeing the slow progress and suspicious nature of the lump, and advised the patient to consult the chief physician of the local Govt. Hospital, who is held in great esteem by the local people for his diagnostic skill. I myself took the patient to the eminent physician who happens to be a friend of mine. He thoroughly examined her, but he could not give any decisive opinion on the case. He said that it looked like cancer, but the possibility of its being an epithelioma of breast could not be altogether ruled out. The case was then referred to some eminent surgeons, all of whom opined that it was a case of mammary cancer and some of them advised surgical removal of the growth. At this stage, the patient was taken to Calcutta. By coincidence, I also happened to be there. So it was decided that I should take her to Chittaranjan Cancer Institute for specialist's advice and treatment. There she was examined by a board of five specialists, who, after a careful persual of the case and a lot of discussion, gave their verdict

that it was a case of mammary cancer and advised her to be hospitalised for usual routine treatment for cancer.

Great distance from home, remote prospect of cure from orthodox treatment as was apparent from personal contact with a very large number of patients in the institution, inconvenience of hospitalisation and its enormous cost made the patient rather diffident. Ultimately the patient herself and her people proposed to place her under my treatment once again, presumably on the belief that if Homœopathy could do no good, it could do no mischief either.

Paucity of clear-cut symptoms, the site of the affection, which aggravated during menstruation, prompted me to try *Phytolacca CM.*, which I did. In the very first month, the result was marvellous. The pain disappeared in about a fortnight. The slight burning and the discharge continued. The second dose was administered exactly after 30 days. After the second dose, the discharge became less, burning also disappeared; the puckered and rough margins of the lump grew smooth and soft. The disfigured breast became round, soft and glossy again. But the lump and slight discharge still persisted. The steady progress gave faith and confidence to the patient and the physician. At this stage, there was a sudden flare up of the case. The burning, swelling and discharge made their re-appearance. The patient complained of burning in hand and feet, mental agitation, flushes of heat and restlessness. I gave her *Sulphur CM.* one dose. All her distressing symptoms disappeared in a week. She maintained steady progress. My record shows that I gave her five doses of *Phytolacca CM.* and one dose of *Sulphur CM.* The patient has no trace of the lump. She is in best of her health. Five years have passed since the completion of her treatment, and till now, she has no trace of her old complaint.

Was it a case of malignant cancer? Was it a case of breast epithelioma? Let the orthodox specialists argue over it. The fact of cure is there to set all quarrels at rest.