

Fundamentals of reporting a case

'Always note and record the unusual... Publish it. Place it on permanent record as a short, concise note. Such communications are always of value.'

–Sir William Osler

Clinical case reports form a fundamental component of the homoeopathic medical literature and are the most popular amongst readers. Case reports illustrate evidence-based classical or contemporary homoeopathic treatment strategies, diagnostics or rare or unusual diseases managed with homoeopathy. They also serve the purpose of raising awareness of important clinical issues amongst the homoeopathic fraternity. Our last case report special issue (Volume 16, Issue 2, April–June 2022) received more than 12,000 downloads within a year. This success has encouraged us to publish another case report special issue this year. Our journal has received 95 submissions in the form of case reports or case series within the last year (2022–2023). Of these, 37.9% were rejected, 39% are under review at present, while 23.1% have been published.

In my editorial of the previous case reports the special issue, we discussed the points to remember before reporting a case.^[1] In this one, I write on the broad criteria that journals follow to select a case report for publication. There are some valuable points that, if followed, immediately grab the attention of the editors. The articles that are of better quality at the time of original submission have higher chances of acceptance later.^[2]

First, authors must carefully consider whether publishing a case report is worthwhile enough to make a meaningful contribution to the existing literature. This is possible by being vigilant of the recent trends in publication and clinical practice that can help identify what could translate as 'novelty' in a case report. Once the authors are sure of the novelty of their topic, then the other components should be stringently worked upon, like the presentation style, completeness of clinical history and other relevant information, their presentation in a standard format, sound justification of the diagnosis and differentials, a substantial take-away lesson or new knowledge and clear conclusions.^[3]

A few examples of the novel case reports from those published in our journal last year include the role of *Carcinosinum* in autism spectrum disorder, lentigo treated with *Sepia officinalis* and management of Rinke's oedema in a non-smoker.^[4-6] Such cases showcased the role of homoeopathy in conditions that were not previously reported.

The cases having some educational component, such as the description of the true classic picture or clinical course of the disease, or application of a homoeopathic concept, can serve to be a practical reference for learning and understanding the said

disease. Examples of such case reports published in IJRH were individualised homoeopathic treatment of acute polymorphic psychotic disorder with symptoms of schizophrenia describing the concept of sector totality, homoeopathic medicine *Gettysburg water* in osteoarthritis, etc.^[7,8]

A formal writing style as per the guidelines, lucid language, and a clear description of the clinical course and treatment of the case presented, has a favourable impact on the editors and reviewers. A good quality photographic evidence and relevant investigations of diagnostic importance as evidence of clinical improvement are pertinent in the present times of evidence-based medicine. A case report on pityriasis versicolor in an infant treated with homoeopathy and homoeopathic management of infertility due to blockage of the fallopian tube are some examples of good presentation style.^[9,10]

Another component is the completeness of data. If the information is in an appropriate, standard format and free from any bias, it adds merit to the paper. Differential diagnosis with cues to reach the final diagnosis and a complete timeline of the course of follow-up are other necessary points that the reviewers look for. The case series on homoeopathic management of polycystic ovarian syndrome and a case report on homoeopathy in the management of generalised anxiety disorder were amongst the studies which show completeness of data.^[11,12]

The discussion and conclusion parts of the cases ideally represent the strengths and limitations of the reported case, comparison of the case outcomes with published literature on the same subject with proper referencing, reasons for the conclusion drawn, main takeaways from that case and non-generalising of the results. These pointers are in accordance with the HOM-CASE CARE guidelines.^[13] Our publications on a case series on the usefulness of homoeopathic medicines for infertility and a case report on dementia treated with individualised homoeopathy are some examples for the discussion and conclusion sections.^[14,15]

Finally, proper citation of the primary, and not secondary, source of references that are most recent and published in quality journals is important. Strict adherence to the journal's instructions for authors is recommended.^[16] Furthermore, it is suggested that novice authors carefully read some previously published articles in the target journal to improve their writing style before submitting the paper.

In the present issue, we present case reports on a variety of clinical conditions: obsessive-compulsive disorder,^[17] appendicitis,^[18] postpartum depression,^[19] hypothyroidism,^[20] chronic ischaemic ulcer,^[21] erythrodermic psoriasis,^[22] epilepsy,^[23] colloid nodular goitre^[24] and pelvic inflammatory

disease.^[25] We hope that with this second case report special issue, we will be successful not only in sensitising the fraternity about the homeopathic management of such clinical conditions but also in motivating clinicians to record, write and publish quality case reports, thus adding merit to the evidence-based collection of valuable cases treated with homeopathy.

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