

## CASE REPORT

# The Efficacy of Homoeopathic Remedy: A Case Report of Adhesive Capsulitis

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### ABSTRACT

Adhesive capsulitis, also known as frozen shoulder, is a condition characterized by pain and stiffness of the shoulder joint. Frozen shoulder is more common in women, though it can also occur in men. It occurs mainly after 50 years of age. This study has been conducted to

evaluate the role of homoeopathic treatment in cases of frozen shoulder disorder. Homoeopathy has also demonstrated great efficacy in curing symptoms and reducing severity of frozen shoulder. (*Altern Ther Health Med.* [E-pub ahead of print.])

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### INTRODUCTION

Frozen shoulder, which is also called frozen shoulder syndrome, or adhesive capsulitis, is a common condition. There is swelling, pain, and severe stiffness of the articular joint. The shoulder joint is composed of bones, tendons, and ligaments. The connective tissue starts to become thick, resulting in discomfort and restricted movement of the shoulder.

It can affect either left or right shoulder. Movement of the affected shoulder becomes partially or fully restricted. The shoulder joint is a ball and socket type of joint, in which the glenoid cavity of the scapula is attached to the head of humerus. The acromion is attached to the lateral side of the clavicle. The joint is covered by hyaline cartilage. Various movements, like flexion, extension, abduction, adduction, and circumduction are done by the shoulder joint.

### Clinical Features

The term frozen shoulder was given by Codman. In the clinical course, pain starts slowly, followed by swelling, and difficulty in movement of the shoulder joint. Also, there is

tenderness of the shoulder on exam, which is a main clinical feature of frozen shoulder. Patients may be unable to sleep on the affected side. The glenohumeral joint becomes stiff and there is tenderness. Pain progresses from nighttime in early stages; later, pain is continuous, and it makes movement restricted. For example, even reaching for a plate becomes difficult.

About 3 – 5 percent of the population are affected with adhesive capsulitis. Approximately 20 percent suffering from this syndrome are affected with diabetes. It is one of the most common orthopedic disorders. This condition is associated with sleep deprivation, anxiety, and irritability, which make daily life miserable. It is also associated with loss of muscle function. Onset is gradual and may continue for a year or two.

### Causes

Trauma, degeneration, inflammation, injury, surgery.

### Risk Factors

Diabetes, hyperthyroidism, hypothyroidism, cardiovascular disease, tuberculosis, Parkinson's disease, and stroke.

### Pathology

The capsule of the shoulder becomes hard due to formation of scar tissue. There is reduction in the quantity of synovial fluid. This fluid normally helps to keep the joint lubricated. In stage 1, when there is pain, inflammatory cytokines are present in the synovial fluid.

### Signs & Symptoms

Frozen shoulder syndrome occurs over a gradual period. It is most common in the age group between 40 to 60 and is more commonly seen in women compared to men.

## Symptoms

There are three main stages of frozen shoulder syndrome.

### 1. Freezing Stage

There is pain on moving the shoulder, and the range of motion becomes restricted. The restricted movement of the shoulder causes scar tissue formation. Pain is severe in this stage, and is typically progressive, usually lasting for six weeks to nine months.

### 2. Frozen Stage

In this stage pain starts diminishing, and there is increased stiffness of the affected part, making it difficult to do regular work. This stage will last from four weeks to six months. In extreme cases the person is unable to move the shoulder at all, and there is scar tissue formation.

### 3. Thawing Stage

The range of motion of the shoulder starts improving. This stage will last from six months to two years. Once the inflammation starts to get under control, signs and symptoms will begin to resolve.

The five important symptoms of the frozen shoulder syndrome are

1. Shoulder Pain
2. Associated Neck Pain.
3. Stiffness.
4. Decreased mobility.
5. Increased Pain at night.

## Shoulder Pain

It is the most important sign, and the pain is present in the musculoskeletal tissue and nerves in the shoulder joint. This area includes the clavicle, upper humerus, and the scapula. It starts as a dull pain and then reaches higher levels of severity.

## Associated Neck pain

The connective tissue becomes tight and thick around the shoulder, and also affects the neck, which is connected to the shoulder.

## Stiffness

The changes in the shoulder make movement extremely difficult, and in some cases almost impossible. The connective tissue capsule becomes tight and thick around the shoulder joint, and it freezes the shoulder joint.

## Decreased Mobility

The pain gradually becomes intensified over time and simple movements like getting dressed and lifting the arm become very difficult. Movement of the shoulder becomes restricted and scar tissue starts to form which then freezes the shoulder.

## Increased pain at night

Pain increases during sleep due to the shoulder joint being more compressed and making it more inflamed.

## Types

Primary or idiopathic adhesive capsulitis occurs without any reason.

Secondary adhesive capsulitis occurs after injury or surgery of the shoulder.

## MATERIALS AND METHODS

This work includes 1 case report which was selected from the Homoeopathic OPD at Dr. DYPHMC & RC which is taken according to standardized Homoeopathic format. During the period 01/09/2020 to 04/12/2020, the patient suffering from frozen shoulder, and attending the OPD, was selected with respect to the clinical presentation of the patient.

## Inclusion criteria

1. Both sexes
2. All ages
3. Patient suffering from chronic diffuse pain.

## Exclusion Criteria

1. HIV +ve patients
2. HbsAg +ve
3. Pregnant and lactating women.

The cases were recorded by keeping the individualistic and holistic concepts in mind. The data was collected by performing a history and physical examination of the patient, which included the following:

- a) Preliminary data
- b) Presenting duration of complaints, in brief chronological order.
- c) Details of complaints were recorded with special reference to onset, progress, and causative factors.
- d) Past medical history, if any, in chronological order to determine the miasmatic background of the patient.
- e) Past medical history including mental reactions, desires and aversions, aggravation to any particular food, habits, appetite, thirst, bowel movements, and perspiration.
- f) Family history to illuminate the miasmatic background of the patient for any disease or disorders running in the family inherited or acquired.

## Chief complaint

The patient started with the complaint of right shoulder pain. Duration of one and a half years. Pain is described as "electric shock like" with tenderness and restricted movements, particularly restricted elevation of hand. There is stiffness of shoulder which is worsened by lifting the hand, and by cold weather; and decreased by resting of the hand.

**Concomitants-** Nil

**Associated complaints-** Nil

**Origin, duration, and progress of the case-**

The right shoulder joint complaints started around 1.5 years prior. She has intermittent complaints and they have not increased in severity. She follows auxiliary instructions and sometimes allopathy for relief of symptoms. Symptoms were not relieved by hot applications. She had taken allopathic medicines that provided temporary relief, and now wishes to take homoeopathic medicines.

**Past History**

Allopathic medical treatments provided temporary relief.

Medical illness- No medical illness in childhood.

No surgeries.

**Family History**

Father-no major illness

Mother- suffering from DM.

Brother- no complaints

Both siblings are younger than her.

Husband – Healthy, no complaints.

**Patient**

Appearance and Physical constitution-

Average build, fair complexion, and fairly nourished

Height- 5 feet 6 inches

Weight- 70 Kg

Appetite- reduced since complaints

Diet- Mixed- non vegetarian once a week

Thirst- forgets to drink water when busy. Drinks an average 2 liters/day.

Desires- lemons+++, spicy food++, non-veg, green leafy veg+

Aversions- Hot milk

Habits- tea- 4 to 5 times in a day, no alcohol/tobacco/smoking

Bowels- Satisfactory.

Urine- Pale yellow, no apparent disorders

Perspiration – in summer, no smell/stains

Cold temperatures/winter preferred in general- as frozen shoulder symptoms have started, there is intolerance to cold/winter now

Sleep- disturbed, has terrible dreams of somebody's death.

**General reaction**

Change of season – leads to upper respiratory tract infection, complaints of pain in shoulder region increases.

Open air- better

Noise- likes silence

Motion sickness/ moon phases- no change

**Menstrual and obstetric history-**

**Menstrual History**

Menarche- at the age of 13 years

Duration- 5/28 days

Character of bleeding- Red clots

Any complaints before/during/after menses- No

Menopause- at the age of 52 years.

**Obstetric History**

Three (1 female, 2 male children)

Full term, normal deliveries

No history of abortion

**Pediatric History of Patient**

Nothing significant.

Vaccination- done

Behavioral problems- Nil

**Life space**

She is eldest amongst her siblings. Her childhood was struggling, and she also became responsible at an early age. Her family financial strength was weak. She completed her education. She still remembered those days when the financial condition was limited, and the family was in a lot of difficulty. She got married at the early age. Unfortunately, her husband did not allow her to do a job, and then she completely got stuck doing household chores. All day she must do household chores, nobody from family was helping her and today also no one helps her. She has two sons and a daughter who are of the age to get married.

Since childhood she gets angered easily, and always gets angry at trifles, and used to fight since she cannot adjust with people talking lies. Now in adulthood she controls her anger but has a tendency to get suddenly angry at trifles.

She wants to take care of family members, also takes up proper responsibility and is very particular and prompt in all she does.

She is dominating, but listens to good suggestions as well, has a good confidence level to talk with everybody, and never fumbles, and expresses herself well in front of seniors and juniors. She has constant thoughts in mind, likes multitasking, and is very active and prompt in work.

She likes to help people. She forgets anger and insults and does not keep any grudges in mind.

Since childhood she is a very ambitious person, and dreamed always to achieve a lot in life, but due to early marriage, she did not get a chance to complete her ambition and dreams. Physical and mental restlessness- constantly something is going in her mind, the thoughts are very quick and brisk. She is social but does not share her personal problems with anyone since she feels that people might take advantage of it. She is mature enough to understand people from their face and their intentions

She is afraid of financial difficulties and feels pressure about it, as her husband does not earn much.

### **Vital Parameters/Physical examination**

Temperature-Afebrile

Pulse- 80/min, regular

B.P- 110/90

Tongue- moist, slight white coating.

### **Physical examination of Right Shoulder-**

Tenderness and restricted movements are present, with no atrophy of muscle.

-Reflexes- Normal

-Muscle tone- Normal

-Muscle strength- Normal.

### **Systemic examination**

Respiratory system- clear

Cardiovascular- normal

Central nervous system - Oriented

Abdomen- non-tender, soft, umbilicus everted

### **Investigations**

CBC: X-Ray of Shoulder (right) anterior-posterior view- to examine the exact inflammation of capsule and bursa; also to look towards any degeneration of collagen suggesting adhesive capsulitis.

Provisional Diagnosis- Frozen Shoulder

### **ANALYSIS OF CASE-**

1. Severe electric shock like pain better by pressure on it [Physical particular, characteristic, subjective]
2. Tenderness of affected parts<sup>++</sup> [Physical particular, characteristic, subjective]
3. Restriction of movements<sup>++</sup> [Physical particular, characteristic, subjective]
4. Restriction<sup>++</sup> [physical particular, characteristic, subjective]
5. Stiffness of shoulder<sup>+</sup> [Physical particular, common, subjective]
6. Appetite reduced since onset<sup>+</sup> [Physical general, common, subjective]
7. Thirst reduced [Physical general, common, subjective]
8. Desires spicy food, non-veg, lemons<sup>+++</sup> [Physical general, characteristic]
9. Dreams of murders, ghosts, horrifying daily [Mental general, characteristic, will]
10. Hot patient [Physical general, characteristic]
11. Responsible [Mental general, characteristic, will]
12. Dominating [mental general, common, will]
13. Bold nature [Mental general, characteristic, will]
14. Constant thoughts in mind [Mental general, characteristic, will]
15. Ambitious person [Mental general, characteristic, will]
16. Restlessness [Mental general, characteristic, will]
17. Active, alert in responses [Mental general, characteristic, will]
18. Anger- expressed violently [Mental general, characteristic, emotion]

### **Evaluation**

1. Bold nature
2. Constant thoughts in mind
3. Active
4. Restlessness
5. Ambitious
6. Dreams- frightful
7. Mind anger violent
8. Generalities- food and drinks-lemon desires
9. Hot patient
10. Restriction of upward movement of shoulder
11. Tenderness of the affected area-rt. shoulder
12. Electric shock like pain on right shoulder

### **Totality of symptoms**

1. Bold
2. Constant thoughts
3. Active
4. Restlessness
5. Ambitious
6. Dreams- frightful
7. Anger expressed violently
8. Desires- lemons
9. Restriction of upward movement of shoulder
10. Tenderness of the affected area-rt. shoulder
11. Electric shock like pain on right shoulder.

**PDF-Hot patient**

**Approach-** Kentian since mental are predominant in this case.

**Repertory Used-** Complete repertory

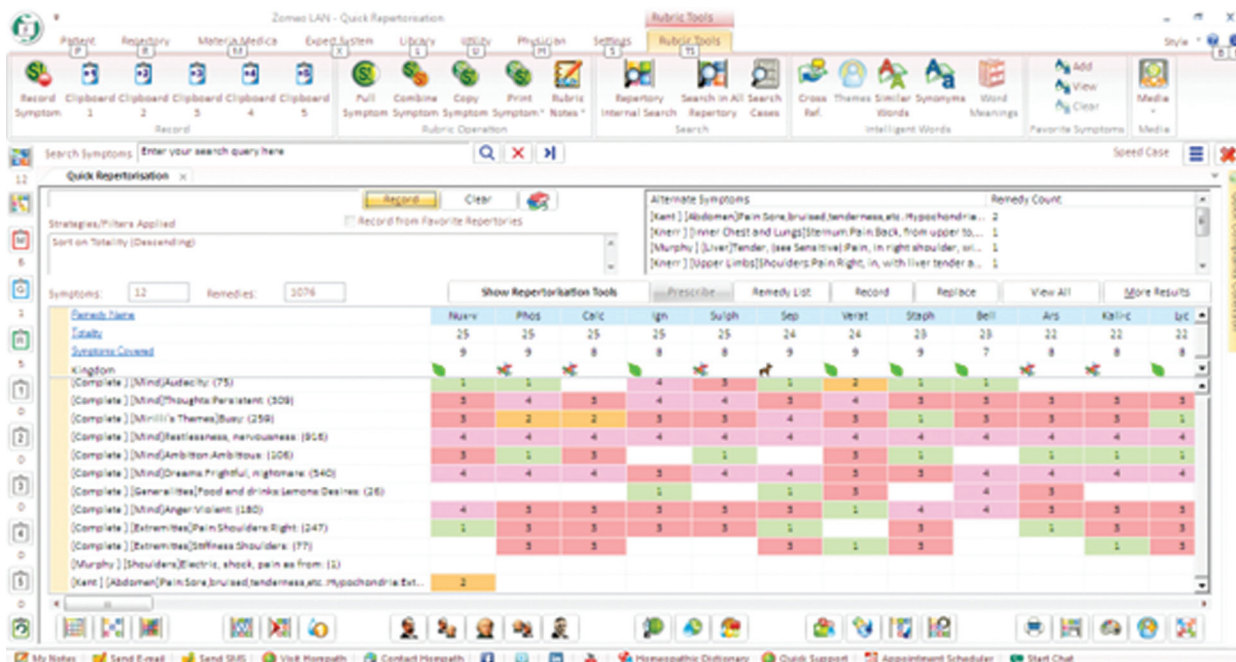
Software used- Zomeo Complete

### **Rubrics selected**

1. Mind audacity
2. Mind thoughts persistent
3. Mind busy
4. Mind restlessness, nervousness
5. Mind ambitious
6. Mind anger violent
7. Dreams- frightful, nightmare
8. Generalities- Food and drinks lemon desires
9. Tenderness- Shoulder
10. Pain- Electric like
11. Shoulder-restricted movement
12. Shoulder-stiffness

### **Probable remedies**

1. Nux Vomica- 25/09
2. Phosphorous- 25/09
3. Calcarea carbonica-25/08
4. Ignatia Amara- 25/08
5. Sulphur- 25/08
6. Sepia- 24/09



### Susceptibility- Low

**Remedy selected.** Calcarea Carbonica- as it covers mind symptoms like, persistent thoughts, restlessness, and nervousness. It covers physical symptoms effectively like pain and stiffness in shoulder.

### Potency- 200C

**Prescription-** Calcarea Carbonica 200C 4 pills TID (three times a day) × 3days  
Sac Lac 4 pills BID × 20 days

### Auxiliary treatment

1. Applying heat or cold to your shoulder can help relieve pain.
2. Continue to use the involved shoulder and extremity as much as possible given your pain and range-of-motion limits.

### Follow up

1. Date- 24/09/2020- complaints are better, pain and stiffness are reduced, which are better up to 60%.  
Prescription- Calcarea Carb 200C (Stat)  
Sac Lac BID × 4 pills × 1 month
2. Date- 26/10/2020- Stiffness is reduced; movements which were restricted are now properly movable with no pain associated. All complaints are mostly better up to 75%  
Prescription- Calcarea Carb 200C (Stat)  
Sac Lac BID × 4 pills × 1 month
3. Date- 01/12/2020- All complaints are reduced up to 85%, no new complaints present. Vitals are normal, patient is feeling better.  
Prescription- Sac Lac BID × 4 pills × 1 month

### Naranjo Criteria

S.No.	Modified Naranjo criteria	Yes	No	Not Sure or N/A
1	Was there an improvement in the main symptom or condition for which the homoeopathic medicine was prescribed?	+2	-	-
2	Did the clinical improvement occur within a plausible timeframe relative to the drug intake?	+1	-	-
3	Was there an initial aggravation of symptoms?	0	-	-
4	Did the effect encompass more than the main symptoms or condition, (i.e., were other symptoms ultimately improved or changed?)	+1	-	-
5	Did overall wellbeing improve?	+1	-	-
6(A)	Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of disease?	0	-	-
6(B)	Direction of cure: did at least two following of the following aspect apply to the order of improvement of symptoms: From organs of more importance to those of less importance. From deeper to more superficial aspects of the individual. From the top downwards	+1	-	-
7	Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?	-	0	-
8	Are there alternate causes (other than the medicine) that with a high probability – could have caused the improvement? (consider known course of disease, other forms of treatment, and other clinically relevant interventions)	-	+1	-
9	Was the health improvement by any objective evidence (e.g., lab test, clinical observation, etc.)	+2	-	-
10	Did repeat dosing, if conducted, create similar clinical improvement	+1	-	-
	Total Score: (Maximum Score= 13, Minimum Score = -3)	10		



## DISCUSSION

Adhesive capsulitis is a disease of unknown etiology where the glenohumeral joint becomes painful and stiff because of the loss of resilience of the joint capsule, possibly with adhesions between its folds. It produces pain and stiffness of the shoulder. In early stages, the pain is worse at night, and stiffness limits abduction and internal rotation of the shoulder. Later, the pain is present at all times and all the movements of the shoulder are severely limited. Often, there is a history of preceding trauma. The disease is more common in diabetics

Homoeopathic remedy has been prescribed on the basis of symptom similarity, which has shown the absolute improvement in pain management. The associated symptoms, like stiffness and restriction of the movements of shoulder, were decreased. The dose of the remedy was arrived at through repertorisation of the totality of symptoms that has been shown the benefit action in the patient by the 3rd follow up visit, which was up to 85%. The remedy *Calcarea Carbonica* was prescribed on the basis of totality of symptoms that arrived through the individualization of the patient. Unnecessary repetition of doses was avoided. Minimum doses were given, considering the principles of Homoeopathy.

## DECLARATION OF PATIENT CONSENT

Patient consent form was obtained. The patient has given her consent for images and report and other clinical information to be reported in journal, patient understands, her name not to be published, and due effort was made to conceal her identity.

## CONFLICT OF INTEREST

The author has no conflict of interest related to the study to disclose.

## FINANCIAL SUPPORT

The author received no financial support, sponsorship, or grants related to the study to disclose.

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