



Case Report

Unilateral eyelid ptosis: A case report cured by Gelsemium sempervirens

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Abstract

Background: A 60 years-old man presented with an 8-day history of acute onset painless left upper eyelid ptosis covering the pupil entirely. Ptosis can affect unilateral or bilateral. He had no other symptoms; importantly pupils were equal and reactive and eye movements were full. There was no palpable mass or swelling. He had a headache but had no other focal neurological signs or symptoms of fatigue. MRI of brain and Orbits showed no remarkable abnormality detected in brain & orbits.

Objectives: Assessment of the homeopathic symptomatic aspects of Gelsemium sempervirens on eyelid ptosis. Showed homeopathy has a major role in the treatment of ptosis. Materials and Methods. The case management was conducted for 3 weeks and only two follow follow-ups were taken according to the law of homeopathy.

Result: Administrating Gelsemium sempervirens 30°C of 5/7 pills orally thrice a day for a week; left eyelid ptosis was improved 60%. The ptosis resolved quickly and the patient remains symptom-free 100% at 3 weeks follow-up by next high potency Gelsemium sempervirens 200C with the same pattern.

Conclusion: Acute ptosis may indicate serious pathology. A careful history and examination must be taken. The appropriate management requires recognition of the underlying cause of it. This case presentation highlights the various aspects of ptosis evaluation and management by homeopathy for future study.

Introduction

Homeopathy can be considered as a complementary treatment option for patients with severe form of the ptosis whose symptoms cannot be controlled with conventional medication without surgery. Individual therapy is conducted based on the level of health theory [1].

Eyelid ptosis, a common neurological sign, is classically explained by weakness of the levator palpebrae superior muscle due to oculomotor nerve disturbance, or by weakness of Muller's muscle secondary to involvement of its sympathetic

innervations, or by intrinsic disorders of the lids and their musculature [2]. Early diagnosis and proper evaluation are the important factors aiding treatment of this condition which can improve the quality of life of the people affected [3].

Aim and objective

To ascertain the usefulness of homoeopathic medicines in the management of 'Ptosis'. To verify the characteristic symptoms of useful homeopathic medicines. To determine the most useful strategy for the management of different intensities of ptosis.

Methodology

This study was conducted in Jannat Homeo Hall (JHH), Kazipara, Mirpur, Dhaka, Bangladesh over a period of three and half weeks i.e. from 15, September 2020 to 10, October 2020.

Study design

A prospective observational study is conducted in secondary care homeopathic clinic.

Materials

1. Case record and repertorization.
2. Drug filtering by repertory.

Case presentation

A 60-year-old, Muslim, married man from low-middle socio-economic status family man presented at our homeopathic clinic with an 8-day history of acute onset painless left upper eyelid ptosis on September 16, 2020. He noticed complete drooping upper left eyelid for 8 days, no closing the left eye or blinking for 8 days, tearing, left eye fatigue, headache occasionally. He did not report any double vision or blurred vision. He had woken with the ptosis and had not improved over the 8 days, with no history of fatigability or variability. Prior to this he had not had any eye problems and was not a contact lens wearer. His medical history included hypertension. He felt fit and well, with no preceding viral illness He was without fever. He had on eye tumors, diabetes, and history of stroke, cancer, and neurological disorders.

He was always mentally prostrated; dizziness and instability, dullness, sluggishness, difficulty of thinking and comprehending. His complaints came from anticipation. He was nervously drowsiness. He noted that his any kinds of ailments used to come from emotions, bad news, unpleasant surprises. His general sensation and complaints was physically weak. On inspection, left eye was completely covered by the upper eye lid.

His medical investigation tests were RBS-6.3mmol/L, Lipid Profile (Fasting) – S Cholesterol (total)-213 mg/dl, S Triglyceride- 173 mg/dl, S Cholesterol(HDL)-37mg /dl and S cholesterol(LDL)-140mg/dl. The MRI of brain and orbit had shown- No remarkable abnormality detected in brain and orbit.

The context of trying conventional management and taking homeopathic medicine

At first, on September 8, 2020 the patient and his son was going to National Institute of Ophthalmology & Hospital in Sher-e-Bangla Nagar, Dhaka, Bangladesh. He had visited outdoor patient of this hospital for his chief complain of dropping of left upper eye lid for 3 days. Then he also noticed that he had hypertension last for 7-8 years and had no diabetes. The doctor of this department referred him to the Ophthalmoplasty department without giving any medicine. On September 10, 2020, the patient visited for treatment at the Ophthalmoplasty department. The doctor advised him of some

medical investigation tests (RBS, serum lipid profile, MRI of brain and orbit) and referred him to the Neuro Ophthalmology department. The patient had done his RBS and serum lipid profile on that day. His medical investigation tests were RBS-6.3mmol/L, Lipid Profile (Fasting) – S Cholesterol (total)-213 mg/dl, S Triglyceride- 173 mg/dl, S Cholesterol(HDL)-37mg /dl and S cholesterol(LDL)-140mg/dl.

After then the patient with his son was going to visit the neurology department (OPD), National Institute of neurosciences and Hospital, Sher-e-bangla Nagar, Dhaka, Bangladesh for conventional treatment on September 13, 2020. This departmental doctor was also advised him of some medical investigation tests (RBS, serum lipid profile, MRI of brain and orbit). Then the patient had done his MRI of brain and orbit report on 15 September, 2020. The MRI of brain and orbit had shown- No remarkable abnormality detected in brain and orbit. The patient was verbally informed by this department without any medication prescription that he would have to undergo surgery on the upper lid of his left eye. During this time, however, the patient and his family did not want to undergo surgery. They then resorted to homeopathic treatment as an alternative treatment.

Discussion

Homeopathic approach

Homeopathy is the method of treatment with that medicine which can produce symptom similarity. Homeopathy is a therapeutic approach of medicine that uses substances selected from nature, such as minerals, chemicals, and plants, which are diluted and potentiated [4]. Its aim is to restore the internal order by stimulating the patient's defense mechanisms [5].

The energy complex of the organism is the capacity of the body to react to overall stimuli, and the symptoms produced by the defense mechanism may appear to protect the inner vital organs. Hahnemann's law of cure states that the symptoms of the remedy and the symptoms produced by the defense mechanism of a patient in a disease state are similar [5].

Homeopathic approaches are based on the levels of health theory, which implies that each person has a specific energy needed for all vital functions and health maintenance, and this energy is influenced by genetics, environment, thoughts, and treatments. People with a low level of health are more difficult to treat or are less likely to present with a systematic improvement until they are treated with the correct successive remedies for a long period of time; those with a higher level of health can be completely cured in a faster and easier manner [6].

A homeopathic treatment uses a source substance and passes through a dilution process (potentization) in which the substance is still biologically active by retaining the proprieties of the initial material [7].

High potencies are obtained by dilution factors greater than the Avogadro's number ($<10^{23}$). Although it was thought that these dilutions could not contain any active ingredients, recent



studies have proven otherwise by detecting the presence of substances in the form of nanoparticles of the initial material by transmission electron microscopy and electron diffraction [8].

General approach

Blepharoptosis (or ptosis) is a down-ward displacement of the upper eyelid margin [9]. Drooping of the upper eyelids in adults, most commonly due to separation of the tendon of the lid-lifting (levator) muscle from the eyelid [10]. Most cases of ptosis can be categorized into one of the following five forms: aponeurotic, myogenic, neurogenic, mechanical,

and traumatic. The aponeurotic form is the most common type of ptosis in adults and is due to disinsertion or stretching of the levator aponeurosis . Stretching can be caused by normal aging, repetitive eye rubbing, or previous intraocular surgery [11]. Age-related blepharoptosis (ptosis) is one of the common conditions encountered in ophthalmology clinics. It can cause superior visual field defect at primary and downward reading gaze and affect quality of life [12].

Selection of medicine

We take this patient as a challenge from the very beginning. We collected physical, mental symptoms including all other symptoms of the patient. Some of the symptoms that are more important in the case of ptosis are differentiated Table 1.

Then remedy selection was done with the help of a homeopathic repertory by sorted out symptoms Table 2.

We then initially selected the homeopathic medicine *Gelsemium* for this ptosis patient to conduct repertory Table 3.

To choose the more accurate medicine, drug filter was conducted by the stage of disease, sex, thermal state of the patient and side of the patient through the homeopathic software Edu Homeopathy. Ultimately we agreed that *Gelsemium* would be a more effective drug for this patient

Table 1: Reportorial Totality.

Symptoms that are more important in the case of ptosis are differentiated.

[KT] [Head]Pain,headache in general:Occiput:Sun,heat of: (2)
 [KT] [Mind]Prostration of mind: (2)
 [BN] [Sensation and complaints in general]Weakness:Exhaustion, prostration, infirmity: (3)
 [BN] [Mind]Dizziness and instability of: (4)
 [BR] [Eyes]Eyelids and margins:Drooping (ptosis): (3)
 [BN] [Eyes]Eyelids:Paralysis, drooping, ptosis, etc.: (4)
 [BN] [Eyes]Eyelids:Paralysis, drooping, ptosis, etc.:Upper: (4)
 [KT] [Mind]Dullness,sluggishness,difficulty of thinking and comprehending: (3)
 [BR] [Nervous System]Sleep:Drowsiness: (3)
 [FA] [Ptosis] Ailments from: Emotions: (3)
 [FA] [Ptosis] Ailments from: Bad news, unpleasant surprises: (3)

Table 2: More important symptoms were taken for conducting repertory.

Remedy Name	Gels	Sep	Caustr	Con	Phos	Nux-m	Rhus-t	Nux-v	Zinc	Kali-c	Nat-m
Totally	31	21	17	16	16	15	15	13	12	12	12
Symptoms Covered	10	7	7	7	6	6	6	5	6	4	4
[KT] [Mind]Prostration of mind:	2	3		3	3	2	1	3	2		2
[BN] [Sensation and complaints in general]Weakness:Exhaustion, prostration, infirmity:	3	4	3	2	4	3	4	4	1	4	4
[BN] [Mind]Dizziness and instability of:	4	2	1	2	2	2	4	2	3	3	3
[BR] [Eyes]Eyelids and margins:Drooping (ptosis):	3	3	3	3	2	2	2	2			
[BN] [Eyes]Eyelids:Paralysis, drooping, ptosis, etc.:Upper:	4								1		
[KT] [Mind]Dullness,sluggishness,difficulty of thinking and comprehending:	3	3	2	2	3	3	2	2	3	3	3
[BR] [Nervous System]Sleep:Drowsiness:	3		2		2	3	2			2	
[FA] [Ptosis] Ailments from: Emotions:	3	3	3	2					2		

Symptoms: 9 Remedies: 246

Table 3: Drug filter was conducted by stage of disease, sex and thermal state of the patient and side of the patient.

Remedy Name	Gels	Op	Sulph	Lach	Spong	Am br
Totally	31	11	10	8	5	4
Symptoms Covered	10	6	4	4	3	3
[KT] [Mind]Prostration of mind:	2	1	3	3	1	1
[BN] [Sensation and complaints in general]Weakness:Exhaustion, prostration, infirmity:	3	1	3	1	2	1
[BN] [Mind]Dizziness and instability of:	4		1	1		
[BR] [Eyes]Eyelids and margins:Drooping (ptosis):	3	2				
[BN] [Eyes]Eyelids:Paralysis, drooping, ptosis, etc.:Upper:	4	1				
[KT] [Mind]Dullness,sluggishness,difficulty of thinking and comprehending:	3	3	3	3	2	2
[BR] [Nervous System]Sleep:Drowsiness:	3	3				
[FA] [Ptosis] Ailments from: Emotions:	3					

Symptoms: 9 Remedies: 6

Repertisation: Drug Filter+ Hot, Left, Acute, Male

Selection of scale and potency

Professional homeopaths frequently use the potencies from the centesimal scale [13]. In the 5th Edition, *Organon of Medicine*, Hahnemann states that the centesimal potencies are quick in their onset and tend to aggravation in the beginning of chronic treatment. He seemed to use his centesimal for the most acute diseases, crisis, or as acute intercurrents during the disruptions of chronic treatment [14].

We took some criteria for potency selection such as susceptibility, nature of diseases, miasmatic background, seat of diseases, general condition of patient, and history of suppression,: paralysis of single parts.

Age of the Patient and Strength of the Vital Force – We tend to use lower potencies, either in single or repeated doses, with babies, with patients who are depleted and weak, and in treating our pets. That said, in cases of severe acute illnesses, or if the lower potencies have been exhausted already, we may use high-potency medicines in these cases. The decision often depends on the clarity of the symptom picture, severity of the symptoms, and compliance.

Treatment and follow-up

Medicine and dose: In the end, with the potentized homeopathic remedy *Gelsemium sempervirens* 30°C, the patient was prescribed, chosen according to his symptoms presented at each follow-up visit. In addition, the patient was advised to take *Gelsemium sempervirens* 30°C of 5/7 pills orally thrice a day for a week on September 16, 2020 and asked to present the follow up after one week of finishing the medicine. With the satisfactory outcome, the medicine was suggested to be continued in the same doses for the next week, maintaining the same earlier pattern; topical applications of any other drug were prohibited. After two weeks the patient ptosis signs are recovery 60%. The patient maintained a gradually improving clinical status of ptosis. In two weeks, the patient gained more recovery and strength of left upper eyelid, with no more mentally prostrated; dizziness and instability, dullness, sluggishness, the difficulty of thinking and comprehending. His physical strength came back. The initial ptosis symptoms were completely absent at this point. He started treatment with *Gelsemium* 2°C, maintaining the same earlier pattern for next a week Figures 1,2.

All of the other symptoms were absent in that week. The acute episode of ptosis was absent and his vision was clear. According to his good clinical status, he does not take at present any homeopathic treatment either.

Result

In this case, the drooping eyelid covered all or part of the pupil of left eye and, interferes with vision. Administrating *Gelsemium sempervirens* 30°C of 5/7 pills orally thrice a day for a week; left eyelid ptosis was improved 60%. The ptosis resolved quickly and the patient remains symptom free 100% at 3 weeks follow-up by next high potency *Gelsemium sempervirens* 200C with same pattern.



Figure 1: (Before Treatment).



Figure 2: (After Treatment).

Conclusion

We present the case of a 60-year-old man diagnosed with complete unilateral upper eyelid ptosis of left eye initially trying to treat with conventional medications without surgery. After an individualized series of homeopathic remedies, he presented a good clinical outcome, with no clinical signs of the disease. This is one of the first cases of ptosis treated with homeopathy presented in our clinic. Homeopathy is a useful alternative approach to be considered among patients with ptosis. A course of three weeks of homeopathic treatment is associated with significant benefits in patients suffering from ptosis, as conducted by *Gelsemium sempervirens*. Further studies should be continued to assess the efficacy of homeopathic medicine for ptosis.

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Author contribution

NEAR: served as the principal author, collected and analyzed the data, and wrote the article. MAZ and RAR: collected the data and contributed to the writing process.



Consent

All authors agreed in a written document to publish the manuscript in this journal, and the patient and his attendant allowed publishing the manuscript with all the information and pictures of his disease in the journal whereas they had no objection. The patient understands that her name and initials will not be published and due efforts will be made to conceal identity, but anonymity cannot be guaranteed.

Ethical approval

The ethical principles in this case were applied.

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