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## CASE-REPORT

### Title: Acute case of Traumatic Subconjunctival Haemorrhage treated by Homoeopathy: A case report

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## ABSTRACT

Sub-conjunctival haemorrhage is one of the most common ocular complaints defined by extravasation of blood beneath the conjunctiva. This is a case of subconjunctival haemorrhage due to blunt trauma in a 36-year-old male, treated by homoeopathic medicine given after careful case-taking and repertorisation using a clinical repertory. It shows the efficacy of homoeopathic treatment in acute cases.

**Keywords:** *Arnica Montana, Homoeopathy, Repertory, Subconjunctival haemorrhage*

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**INTRODUCTION**

A subconjunctival haemorrhage (SCH) is defined as the accumulation of blood underneath the conjunctiva or in the subconjunctival space. It is the most common cause of acute redness of the eyes. It is benign and painless in nature. Blood leaks from blood vessels between the conjunctiva and Tenon's capsule, but it becomes evident when the blood leaks into the external, exposed part of the bulbar conjunctiva.<sup>(1)</sup>

Subconjunctival haemorrhage is commonly observed in the temporal and inferior regions of the conjunctiva.<sup>(2)</sup>

However, any injury can cause localised haemorrhage, specifically at the site of injury, often in the temporal region.<sup>(3)</sup> The most common causes include local trauma, hypertension, acute conjunctivitis, and diabetes mellitus. Among these, local trauma is the most prevalent cause.<sup>(1)</sup>

Traumatic SCH remains localised to the site of injury, whereas diffuse SCH is usually due to vascular conditions.<sup>(3)</sup>

The diagnosis of SCH is made clinically, as it presents as a peculiar red lesion on the sclera; however, a differential diagnosis can be made with episcleritis, which has similar redness in the sclera but lacks the distinctly demarcated lesion. Scleritis is usually severe, bilateral and tender on palpation, in association with any autoimmune disease condition. In case of trauma, conditions like retrobulbar hematoma and rupture of the globe must be ruled out. Other similar conditions having a traumatic origin could be corneal abrasion and

conjunctival laceration.<sup>(6)</sup>

Definitive diagnosis will be based on history and physical examination primarily, and if required, then appropriate laboratory testing will be done.

**PATIENT INFORMATION**

A 36-year-old male patient, who is an electrician by profession, came to my OPD with redness in the right eye, which suddenly appeared after being accidentally hit by his daughter. The sudden, blunt trauma caused extravasation of blood in the subconjunctival space on the temporal side of the right eye.

The patient was experiencing a sensation of sore bruising in the right eye.

The patient had consulted an ophthalmologist who diagnosed it as a case of subconjunctival haemorrhage. The ophthalmologist examined the patient, and all the clinical findings were normal, including the pupillary and corneal reflexes. There was no restriction in the movement of the eyeball.

There was no discharge or lachrymation from the eyes. The visual acuity was intact.

The case was taken, and considering the suddenness of the complaint and lack of generals in the case, Boericke repertory was chosen to repertories the case.

In this case, the symptoms were primarily specific symptoms of SCH. The case notably lacked general symptoms.

**CASE ANALYSIS AND EVALUATION**

The main symptoms presented by the patient

were the sensation of bruised soreness and hyperemia in the conjunctiva. I chose to repertorize this case from a Clinical repertory as this particular case lacked general symptoms and had only a few common symptoms with clinical diagnosis. <sup>(5)</sup>

For repertorisation, Boericke’s repertory was used from homeopath Firefly software. Two rubrics were: 1. Eyes; pain; type: bruised, 2. Eyes; Conjunctiva: Ecchymosis and injuries

| Remedy Name  | Arn   | Gels  | Ham   | Acon  | Aur-m | Cimic |
|--|-------|-------|-------|-------|-------|-------|
| Totality / Symptom Covered                                 | 6 / 2 | 3 / 1 | 3 / 1 | 2 / 1 | 2 / 1 | 2 / 1 |
| [Boericke ] [Eyes]Pain :Type:Bruised: (7)                  | 3     | 3     |       |       | 2     | 2     |
| [Boericke ] [Eyes]Conjunctiva:Ecchymosis and injuries: (6) | 3     |       | 3     | 2     |       |       |

Figure-1: Repertorial sheet

**PRESCRIPTION**

Arnica Montana 200c was prescribed based on Repertorisation and knowledge of Materia medica. 200 potency was administered orally in 30 no. globules, and four globules three times a day were given for 5 consecutive days.

**REMEDY JUSTIFICATION:** Arnica Montana is used in ailments after traumatic injuries, with the keynote sensation of a sore, lame, and bruised feeling. It affects tissues and blood vessels, causing ecchymosis and haemorrhages.

**FOLLOW-UPS:**

**23/12/24: first prescription-** ARNICA MONTANA 200/4PILLS/THREE TIMES A DAY/FOR 5 DAYS

**28/12/24:** The patient presented 5 days later with reduced extravasation of blood in his eyes, and he reported no bruising sensation in the affected eye.

The patient was prescribed SACCHRUM LACTIS 200/4 PILLS/ THREE TIMES A DAY/ FOR 5 DAYS.

**02/01/25:** The patient came with a completely resolved subconjunctival haemorrhage.

**BEFORE AND AFTER PICTORIAL EVIDENCE:**



**Figure-2: 23/12/24 (first visit)**



**Figure-3: 28/12/24 ( 1<sup>st</sup> follow-up)**



**Figure-4: 2/1/25 ( 2<sup>nd</sup> follow-up)**

## DISCUSSION

This case provides enough evidence that Homoeopathy is useful in treating acute cases, which some believe is the lacuna in homoeopathic treatment. The efficacy of Homoeopathic medicines in treating chronic diseases is well-known to everyone. However, people think that homoeopathy is slow and only beneficial in chronic diseases of long standing. A similar case of subconjunctival haemorrhage was treated by using Boericke repertory, and the remedy used was Arnica Montana<sup>(7)</sup>, which again highlights the action of Arnica Montana on blood and blood vessels as well as the importance of clinical repertory in our day-to-day practice. Our case had a similar lack of symptoms and required quick intervention. Cases like these provide evidence that even if we get only a few common symptoms and use appropriate repertory and rubrics, we can get the correct remedy and reach a cure in the shortest and reliable way, as stated in aphorism 2 of the Organon of Medicine.<sup>(8)</sup>

## CONCLUSION

More case reports on acute illnesses will help in generating evidence to prove that homoeopathy can treat acute conditions effectively. This case report clinically verifies Arnica Montana's action on the tissues, after traumatic blows, and on ecchymosis and haemorrhages, as mentioned in *Materia medica*.<sup>(4)</sup>

**CONFLICT OF INTEREST:** None

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