

Squamous Cell Carcinoma of the Tongue

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ABSTRACT

Squamous cell carcinoma can be cured by constitutional prescribing in homoeopathy. The following case tries to bring out the contrast between homoeopathic prescribing and this incurable disease.

KEYWORDS: Carcinoma, Homoeopathy, Homeopathy, Oral Carcinoma, Tongue Cancer, Squamous cell Carcinoma

Abbreviations: SCC - Squamous cell carcinoma Type 1 - Cancer of oral tongue, Type 2 – Cancer of the base of the tongue. Agg. – aggravation, F – degree Fahrenheit, B.P – blood pressure, mm of Hg – millimeter of mercury.

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INTRODUCTION

In oncology squamous cell cancers of the head and neck are often considered together because they share many similarities – in incidence, cancer type, predisposing factors, pathological features, treatment and prognosis.

Squamous cell carcinoma of the tongue is one of the most common oral cancers, with most cases occurring on the lateral border of the tongue. SCC of tongue dorsum is very rare, especially midline. Please do remember that once a CANCER patient is always a cancer patient throughout his/her life. There is every chance / for reoccurrence due to several factor such as junk food, alcohol, smoking, tobacco chewing, genes, bad luck etc mainly due to dissimilar and suppressive treatment and if the patient is not treated miasmatically by a homoeopath. Cases are curable, incurable, incurability and terminal.

1. CURABLE case if the patient lived upto 10 yrs and more with better quality of life.
2. INCURABLE cases if the patient survive for 5 yrs it is called “5 yrs SURVIVAL PERIOD”.
3. INCURABLE case when the patient has multiple cancers or multiple secondaries in vital organs, cachexia has developed he/she has reached the stage of incurability.

4. TERMINAL cases if the patient does not respond to treatment in Allopathy or other medical systems and pathology are advanced with metastasis in various parts beyond reversible stage he/she is declared as a case of TERMINAL CANCER.

The purpose of this study because there is no cure for either type of SCC and treatment consists amelioration of clinical symptoms, genetic counselling is the only preventive approach to this disease.

Case study

Preliminary Data –

Name - Mr. Xyz	Date - 10-12-2020
Age - 42 year	Sex – Male
Occupation - Labour	Marital Status - Married

Chief complaints - A Male patient of aged 42 years complained of deep seated cracks on middle of the tongue, difficulty in talking, pain when swallowing, numbness in the mouth, bleeding from tongue on and off with puffiness on face aggravated by warmth.

History of present illness - Patient comes with the complaint of not able to eat anything in last 3-4 month due to deep seated cracks in the middle of

tongue and there is intense pain in the left side of head. Due to the complaint of tongue he is not able to talk properly and the patient lost the weight because of not able to eat anything. Puffiness and swelling of face is marked.

Personal History - Patient had a habit of alcohol and tobacco chewing.

Physical generals - Patient appetite was poor and not able to tolerate food even he was hungry. He drink 3-4 liter cold water per day. His tongue appeared moist and slightly white coated. He had a desire for large quantity of cold water. Profuse sweat with fear. He was a hot patient, as there was aggravation after warm things. Tongue was excessive sensitive to the least touch.

Mental generals - Patient seemed to be tensed and expression was anxious. His speech was very slow and low. At the time of counselling, the patient was very scared, crying telling during all his trouble. Fear of dying. He said dr. I saw many doctors but everyone said that I will not be able to live for long, that's why I have come to you, dr. will it be okay, please help me, I have a small child, their life also has to be settled. He wants to know more about disease and want assurance about his better quality of life. As soon as I gave assurance don't worry you will be fine then the patient became very happy, and said now I will be fine.

Vitals sign

- Pulse – 88/min
- B.P – 130/80 mm of Hg

Diagnosis

Diagnosis was based on clinical examination and histopathological report.

Totality of symptoms

1. A/F – Fear of death, Fright
2. Want to know about his disease
3. Restlessness due to fear of death
4. Anxiety – driving from place to place
5. Communicative
6. Assurance about his life
7. Anxiety followed by indifference
8. Appetite is less
9. Thirsty
10. Sleep disturbs due to complaint
11. Habits of chewing tobacco
12. Heavy, burning and bursting type of pain in left side of head.

Rubrics

1. Mind - A/F – Fear of death, Fright
2. Mind - Light desire for
3. Mind - Restlessness fear from
4. Mind - Anxiety – driving from place to place
5. Mind - Communicative
6. Mind - Assurance
7. Mind - Anxiety followed by indifference
8. Stomach – Appetite decreased
9. Stomach – Thirst-cold-water-short interval
10. Sleep – Disturbed
11. Generals – food and drink – tobacco
12. Head – Pain – burning, bursting

Differential Remedy – Aconite Napellus, Rhus Toxicodendron, Calcarea fluorica.

Final Remedy – Aconite Napellus

Prescription –

1. Aconite Napellus 30, 3 Powder dose for three days in the morning.
2. Sac lac 30 (3 Pills BD for 15 days.)
3. Lobelia Erinus Q, 10 drops in half cup of water three times a day.

1st Follow-up (05-01-2021)

Complaint relief for 30% of patient. Patient talks easily as compare to before. Pain in left side of head is reduced. Swelling and Puffiness of face reduced. Moderate bleeding present from tongue. Deep seated cracks on tongue improved more than 30-35%. Sleep is slightly improved. Patient feel better and looked fresh and positive.

Rx –

1. Aconite Napellus 200 (Single Dose)
2. Sac Lac 30 (3 Pills BD for one month)
3. Lobelia Erinus Q, 10 drops in half cup of water three times a day

2nd Follow-up (05-02-2021)

Complaint relief for 50% of patient. Patient talks easily more compare to before. Pain in left side of head is better. Swelling and Puffiness of face better. Deep seated cracks on tongue improved more then 60-65%. Mild bleeding present from tongue. Sleep is improved. Patient feel better and looked fresh and positive.

Rx –

1. Aconite Napellus 200 (Single dose)
2. Sac Lac 30 (3 Pills BD for one month)
3. Lobelia Erinus Q, 10 drops in half cup of water three times a day

3rd Follow-up (05-03-2021)

Complaint relief for 60% of patient. Deep seated cracks on tongue improved more than 70-75%. Sometimes bleeding present from tongue. Pain in left side of head is better. Swelling and Puffiness of face better.

Rx –

1. Sac Lac 30 (3 Pills BD for one month)
2. Lobelia Erinus Q, 10 drops in half cup of water three times a day

4TH Follow-up (05-04-2021)

Complaint relief for 65% of patient. Deep seated cracks on tongue improved more than 70-75%. On and off bleeding present from tongue. Pain in left side of head is better. Swelling and Puffiness of face better. No such change compare to previous complaint.

Rx –

1. Aconite Napellus 200 (Single Dose)
2. Sac Lac 30 (3 Pills BD for one month)
3. Lobelia Erinus Q, 10 drops in half cup of water three times a day

5th Follow-up (05-05-2021)

Complaint relief for 75% of patient. Deep seated cracks on tongue improved more than 80%. No bleeding present from tongue. No pain in left side of head. Swelling and Puffiness of face 80% better.

Rx –

1. Sac Lac 30 (3 Pills BD for one month)
2. Lobelia Erinus Q, 10 drops in half cup of water three times a day

6th Follow-up (05-06-2021)

Complaint relief for 85-90% of patient. Deep seated cracks on tongue improved more than 85%. No bleeding present from tongue. No pain in left side of head. Swelling and Puffiness of face 90% better.

Rx –

1. Aconite 200 (Fluxion Potency Single Dose)
2. Lobelia Erinus Q, 10 Drops in half cup of water three times a day
3. Sac Lac 30 (3 Pills BD for one month)

Reasons for Choosing Remedy –

1. Aconite Napellus choosing as a final prescription because Aconite patients always want to assurance from our doctor in any diseased condition if the patients get the assurance from his doctors regarding the suffering of disease then only the patient feels better and feeling positive that's why the patients recover fast and rapid. The other reason for choosing Aconite because patient is very Anxious, Anxiety about health, Restless, Fear of darks, Light desire for, Communicative, Restless – Driving from place to place, Assurance want of, Anxiety followed by indifferent. Patient is thirsty, less appetite, sleep disturb, Heavy, Burning bursting type of pain in the left head.
2. Lobelia Erinus Q because ear pain if the cancer is in mouth and that is causing pain in the ear we usually think of Chamomilla here but that doesn't work then we use lobelia Erinus.

Lobelia Erinus is a good medicine for ear pain which is due to cancer in the area around it.

OUTCOME:-

This study show the potential benefit of individualized homoeopathic treatment in Squamous cell carcinoma of the tongue in male which leads to decreased the severity of binging episode. The varied nature of the prescription indicates the highly individual manifestation of Squamous cell carcinoma of the tongue. Follow-up studies are recommended to explore this treatment modality as a complementary therapeutic option in many Squamous cell carcinoma.

Report

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HOMI BHABHA CANCER HOSPITAL, VARANASI
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Shivpurwa, Varanasi, Uttar Pradesh, 221002

DIAGNOSTIC SERVICES – DEPARTMENT OF PATHOLOGY

Case No. : **KC/59770** Req No. : **FZKSP20011518** Path No. : **009630/KC**
Name: [REDACTED] Gender/Age: [REDACTED]
Category: **C** DMG: **DMG - HEAD & NECK(A)**

FINAL HISTOPATHOLOGY REPORT 10/10/2020

Nature of Material Received: 1 Biopsy

Gross Description:
Received single greyish white soft tissue piece, measuring 1.6x1x0.7 cm. Entirely submitted.

Sections:
Right lateral border of tongue punch biopsy [Path no. 9630 KC].

Grossed by: Dr. Juhi Varshney

Microscopic Description:
Section studied shows features of well differentiated squamous cell carcinoma.

Impression:

- Right Lateral Border of Tongue-Punch Biopsy :
- Squamous cell carcinoma, well differentiated

CASE PHOTO:-



1st Counselling



1st follow-up



5th follow-up