



A Case of Chronic Suppurative Otitis Media Treated with Homoeopathic Medicine Pulsatilla – A Case Report

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ABSTRACT

Chronic Suppurative Otitis Media (often abbreviated as CSOM) is a long-term (chronic) ear infection that affects the middle ear and typically involves the presence of pus or discharge. This condition is a common cause of ear discharge in both adults and children and can lead to hearing loss if not treated effectively. This case study aims to evaluate the effectiveness of individual homoeopathic treatment in managing and reducing symptoms of Chronic Suppurative Otitis Media (CSOM) and to assess its impact on overall patient health and quality of life. This case study aims to understand the effectiveness of individualised Homoeopathic Remedy Prescribed for the treatment of CSOM based on the patient's totality of symptoms, constitution and medical history. To compare the outcome of homoeopathic treatment with previous conventional treatment used by the patient before opting for homoeopathy, using COMOT-15 questionnaire. Patient was treated with the help of the homoeopathic medicine pulsatilla. The case study demonstrated that individualized homoeopathic treatment was effective in managing symptoms of CSOM, heading to a significant reduction in ear discharge, pain and discomfort. The homoeopathic approach appeared to contribute to a decreases recurrent rate of CSOM symptoms compared to previous conventional treatment.



INTRODUCTION

Chronic Suppurative Otitis Media (often abbreviated as CSOM) is a long-term (chronic) ear infection that affects the middle ear and typically involves the presence of pus or discharge¹. This condition is a common cause of ear discharge in both adults and children and can lead to hearing loss if not treated effectively². Chronic Otitis Media (COM) refers to long-standing inflammation in the middle ear, which can result from repeated or inadequately treated acute otitis media (AOM)^{1,2}. In CSOM, the infection causes a persistent hole or perforation in the tympanic membrane (eardrum), allowing infected fluid or pus to drain from the middle ear³. The infection is often caused by bacterial pathogens, such as *Pseudomonas aeruginosa*, *Streptococcus pneumoniae*, or *Staphylococcus aureus*¹. The hallmark symptom of CSOM is a persistent or recurrent discharge of pus or fluid from the ear^{1,2,3}. The discharge may be foul-smelling and can vary in consistency (watery, mucoid, or purulent). Chronic inflammation and scarring of the eardrum and middle ear can lead to conductive hearing loss (reduced ability to hear sounds). Some individuals may experience discomfort or pain in the ear, though it may not always be severe. Ringing in the ears may occur due to the chronic nature of the condition. In some cases, a low-grade fever can accompany the infection³.

PRESENTING COMPLAINT

Patient came with the complaint of moderate pain and yellowish, non-offensive, mucoid and occasionally bloody discharge from right ear on and off in nature since 1 year but aggravated since 3 months.

HISTORY OF PRESENTING COMPLAINTS -

Patient was apparently well one year back gradually one fine day patient started experiencing itching and slight pain around his right ear after coming back from swimming classes. Since it was very acute, patient didn't bothered and soon after next 2 months patient again started experiencing similar complaint, for that patient consulted allopathic physician and took allopathic medication which gave relief to the patient but there was relapse of the symptom, even after that patient continued with allopathic medication. Since 3 month complaint became worse due to repeated attacks, Patient started with ear ache and non-offensive yellowish mucoid and occasionally bloody discharge which aggravated due to severe exposure to cold air, water, cold food and drinks (Icecream) and was better by keeping cotton plug in ear. No history of fever, redness, tinnitus and vomiting.

CHRONIC OTITIS MEDIA OUTCOME TEST-15 (COMOT-15)

Following you will find a list of symptoms and social/emotional effects of your rhinosinusitis. We would like to know more about these issues and would appreciate your answers of these questions to the best of your knowledge. There are no right or false answers, and only you can provide us this information. Please rate your problems as they have been over the past six months. Thank you for your participation. Please do not hesitate to ask any of us for assistance if necessary.

Considering how severe the issue is when you experience it and how frequently it happens, please rate each item below on how "bad" it is by circling the number that corresponds with how you feel using this scale:	No issue at all	Very mild issue	Mild or slight issue	Moderate issue	Severe issue	Problem as bad as it can be
1. Discharge from the ear	0	1	2	3	4	5
2. Earache	0	1	2	3	4	5
3. Ear pressure / fullness of the ear	0	1	2	3	4	5
4. Tinnitus (ringing in the ear)	0	1	2	3	4	5
5. Headache	0	1	2	3	4	5
6. Hearing loss	0	1	2	3	4	5
7. I have difficulties to understand someone speaking from a larger distance	0	1	2	3	4	5
8. I have difficulties to understand something in a noisy surrounding area	0	1	2	3	4	5
9. I have difficulties to understand when people are speaking simultaneously	0	1	2	3	4	5
10. My Hearing loss makes me feel depressive / sad	0	1	2	3	4	5
11. Because of my hearing loss I fear to misunderstand other people	0	1	2	3	4	5
12. My hearing loss does cause embarrassing situations	0	1	2	3	4	5
13. I am scared that my ear problems will increase in the future	0	1	2	3	4	5
14. Overall assessment of the impact of the ear disease on quality of life	0	1	2	3	4	5
For question 15 please notice that we would like to know the number of your visits to the doctor concerning you ears during the last six months	None	One visit	Two visits	Three visits	Four visits	More than four visits
15. Frequency of doctor visits for problems with my ear(s)	0	1	2	3	4	5

FIGURE 1 Patient first visit

FINAL DIAGNOSIS

Homoeopathic - True Chronic Miasmatic Disease (Psora Sycosis)

Disease - Chronic Suppurative Otitis Media AA91

MEDICINAL MANAGEMENT

Rx PULSATILLA 200C 1 DOSE STAT RUBRUM ½ DRAHM (4-0-4) * 1 WEEK

RESULT

Patient was treated with the help of the homoeopathic medicine pulsatilla. Based on nature of disease, susceptibility, intensity of the disease, age of the patient moderate susceptibility was detected so moderate potency was selected. Medicine was selected based on repertorial totality^{5,10}. Before the treatment the COMOT-15 scoring was 14. After the treatment course, the scoring reduced to 2. This quantifies the efficacy of pulsatilla in treating CSOM.

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FIGURE 2 After Treatment

DISCUSSION

Chronic suppurative otitis media is a persistent ear infection characterized by ear discharge (otorrhea) through a perforated tympanic membrane for more than six weeks. it is commonly seen in children and adults and it is linked to poor hygiene, recurrent upper respiratory infections, or prior acute otitis media. In Homoeopathy treatment focuses on addressing the individual's susceptibility, constitution, and underlying cause to stimulate natural healing.

CSOM typically result from chronic inflammation and infection of the middle ear. Causative organism includes *Pseudomonas aeruginosa*, *staphylococcus aureus*, *proteus mirabilis* and occasionally fungi.



Relation with aphorism- Aphorism 71 – Chronic disease arise from a deeper miasmatic origin, which must be addressed to cure them completely⁶. CSOM is often recurring indicating a miasmatic layer, primarily psora with sycotic or syphilitic components. Aphorism 78 – Chronic disease are caused by fundamental miasm (psora, sycosis and syphilis) which manifest in various form over time it left untreated⁶. The chronicity and recurrent discharge in CSOM points to psoric inflammation or syphilitic destruction. Aphorism 203- Medicine must be selected based on the totality of symptoms, as these represent the internal derangement⁶. In CSOM, the peculiar symptom eg like Type of discharge, associated hearing loss, modalities guide the remedy selection.

CONCLUSION

The case study demonstrated that individualized homoeopathic treatment was effective in managing symptoms of CSOM, heading to a significant reduction in ear discharge, pain and discomfort. The homoeopathic approach appeared to contribute to a decreases recurrent rate of CSOM symptoms compared to previous conventional treatment

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