# Uterine Fibroids and Homoeopathy

© Dr. Rajneesh Kumar Sharma MD (Homoeopathy) Dr. Swati Vishnoi BHMS

# **Uterine Fibroids and Homoeopathy**

© Dr. Rajneesh Kumar Sharma M.D. (Homoeopathy)

Dr. Swati Vishnoi B.H.M.S.

Homoeo Cure & Research Institute

NH 74, Moradabad Road, Kashipur (Uttaranchal) INDIA

Pin-244713 Ph. 05947-260327, 9897618594

E. mail- drrajneeshhom@hotmail.com

www.treatmenthomoeopathy.com www.homeopathictreatment.org.in

www.homeopathyworldcommunity.com





# **Contents**

Synonyms
Definition
Causes
Hormones
Environment
Ethnicity
BMI
Pregnancy
Early menstruation
Contraceptives
Family history
Types
Myometrial (intramural)
Submucosal
Subserosal fibroids
Pedunculated
Cervical
Symptoms
Prolonged menstrual periods
Pelvic pressure and pain
Pain with intercourse
Infertility
Miscarriage
Pregnancy complications
Diagnosis
Homoeopathic Treatment
Bibliography

## **Synonyms**

Leiomyoma, fibromyoma, myoma, Fibroid tumor, fibroma

#### **Definition**

Uterine fibroids are benign tumors of muscular and fibrous tissues in the uterine muscle appearing during childbearing age, often presenting with heavy menstrual bleeding and pressure on the pelvis. (Psora/Sycosis)

A quarter woman in their reproductive years may have perceptible fibroids. Fibroids develop between the ages of 30-50 years of age. It is never seen in women less than 20 years old. After menopause, if a woman does not take estrogen, fibroids shrink. (Causa occasionalis)

#### Causes

The cause of fibroids is unknown, however an amalgam of hormonal, genetic, and environmental factors is responsible to develop symptomatic fibroids.

#### Hormones

Fibroids are associated with increased estrogen production. They are rare in women less than 20 years of age as well as in postmenopausal women. Estrogen levels vary with menstruation, with menopause, and with some medications. (Psora+++/ Sycosis++)

#### **Environment**

Alcohol consumption and a sedentary lifestyle have been associated with fibroids. (Causa occasionalis)

#### **Ethnicity**

their fibroids occur at a younger age, and are often larger and more numerous than in other ethnic groups. (Psora)

#### BMI

The higher the BMI (body-mass index) the higher is the risk of developing fibroids. (Psora/Sycosis)

#### Pregnancy

Women who have given birth seem to have a lower risk of developing uterine fibroids. Recent information indicates that pregnancy may protect against fibroids. (Causa occasionalis)

#### Early menstruation

Women whose first period was before age 10 are more likely to have uterine fibroids. (psora)

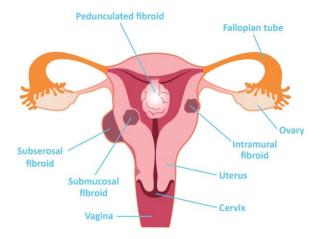
#### **Contraceptives**

Women taking birth control pills are less likely to develop significant uterine fibroids. (Causa occasionalis)

#### Family history

Heredity may play its role. (Psora)

# **Types**



Uterine fibroids are classified by their position in uterus-

#### Myometrial (intramural)

Fibroids are in the muscular wall of the uterus.

#### Submucosal

Fibroids grow just under the interior surface of the uterus, in the muscle beneath the uterine lining.

#### Subserosal fibroids

Fibroids grow on the outside wall of the uterus.

#### **Pedunculated**

Fibroids usually grow outside of the uterus, attached to the uterus by a base or stalk.

#### Cervical

Fibroids growing in the cervix.

# **Symptoms**

Uterine fibroids cause no symptoms at all. When symptoms from uterine fibroids appear, they can include-

#### Prolonged menstrual periods

Women who have submucous or intramural fibroids are most likely to have heavy uterine bleeding. (Psora/Sycosis)

#### Pelvic pressure and pain

Large fibroids that press on nearby structures such as the bladder and bowel can cause pressure and pain. Larger fibroids tend to cause worse symptoms and cause- (Causa occasionalis)

Abdominal discomfort

- Feelings of pressure
- Abdominal distension
- Urinary problems
- Frequency of micturition
- Urinary retention
- Bowel problems
- Constipation

#### Pain with intercourse

Fibroids may cause dyspareunia due to pressure symptoms. (Psora/ Causa occasionalis)

#### **Infertility**

This is a rare symptom of fibroids. It probably accounts for less than 3% of infertility cases. Fibroids can cause infertility by compressing the uterine cavity. Submucous fibroids can fill the uterine cavity and interfere with implantation of the fertilized egg. (Psora/ Causa occasionalis)

### Miscarriage

This is also an unusual symptom of fibroids, probably accounting for only a tiny fraction of the miscarriages that occur. (Psora/ Sycosis / Causa occasionalis/ Syphlis)

#### Pregnancy complications

Fibroids can greatly increase in size during pregnancy, because of increased levels of estrogen. They can cause pain, and even lead to premature labor. They may also cause intrapartum bleeding. (Psora/Sycosis/Causa occasionalis/Syphlis)

# **Diagnosis**

- Ultrasound
- Magnetic resonance imaging of pelvis
- Uterine biopsy
- Hysterosalpingogram
- Sonohysterogram
- Hysteroscopy

# Homoeopathic Treatment

ABDOMEN – DISTENSION abies-c. Abrot. absin. acal. acet-ac. acon-c. ACON. aesc. Aeth. AGAR. All-c. allox. ALOE alum-sil. Alum. alumn. am-c. am-m. ambr. Anac. anan. anis. Ant-c. Ant-t. anthraci. Apis Apoc. aran-ix. Arg-met. ARG-N. arist-cl. Arn. ars-i. ars-s-f. ARS. Asaf. asar. aur-ar. aur-m. aur-s. aur. Bapt. Bar-c. Bar-i. Bar-m. bar-s. bell. Berb. beryl. bism. borx. Bov. Brom. Bry. bufo but-ac. cact. cadm-met. cain. calad. calc-ar. calc-f. calc-i. calc-p. calc-s. CALC. cann-i. cann-s. Canth. Caps. Carb-ac. Carb-an. CARB-V. carbn-dox. CARBN-S. card-m. carl. castm. Caust. cedr. Cham. Chel. CHIN. Chinin-ar. Chinin-s. CIC. cimic. Cina cinnb. Cist. clem. coc-c. COCC. coff-t. coff. COLCH. coll. COLOC. Con. cop. Corn. Croc. Crot-h. Crot-t. Cupr. Cycl. Dig. Dios. dol. dulc. Eup-per. euph. euphr. fago. ferr-ar. ferr-i. ferr-p. ferr. fil. Gamb. gins. Glycyr-g. gran. GRAPH. grat. guat. Hell. HEP. hydr. Hyos. hyper. ictod. ign. Iod. ip. jal. Jatr-c. jug-r. Kali-ar. Kali-bi. KALI-C. kali-chl. Kali-i. Kali-n. Kali-p. Kali-s. Kreos. Lac-c. Lac-d. LACH. lact. laur. led. lept. Lil-t. lob. LYC. m-ambo. M-arct. m-aust. MAG-C. Mag-m. mag-p. mag-s. manc. mand. mang. med. Meny. Merc-c. Merc-d. MERC. Mez. mill. mim-p. mosch. Mur-ac. Murx. naja nat-ar. NAT-C. NAT-M. NAT-P. Nat-s. nicc. Nit-ac. nux-m. Nux-v. oci-sa. ol-an. Olnd. Op. opun-s. ox-ac. pall. par. paraf. Petr. PH-AC. PHOS. pitu-p. plan. Plat. plb. podo. prun. psil. Psor. ptel. Puls. pulx. pyrog.

```
Sil. sphing, spig, spong, squil. Stann. Staph. Stram. Stront-c. stroph-s. sul-ac. SULPH. sumb. tab. tarent.
TER. Thuj. Til. Trios. uran-met. uran-n. vac. Valer. vario. Verat. verb. vip. visc. yuc. zinc-val. Zinc. zing.
ABDOMEN - PAIN - Pelvis - Organs; pelvic - cramping vib.
ABDOMEN - PAIN - Pubic region - menses; during rad-br.
ABDOMEN - PAIN - Umbilicus - Region of umbilicus - tumor; as from a spig.
ABDOMEN - TUMORS - Sides - right - sensation as if med.
ABDOMEN - TUMORS Abrot. Cadm-s. calc-ar. calc-i. calc-p. Calc. Con. Merc. nat-m. staph.
FEMALE GENITALIA/SEX - COITION - painful alumn. apis ARG-N. bell. Berb. borx. Calc-p. calc. coff.
Ferr-m. Ferr-p. Ferr. ham. Hep. Hydr. iqn. Kali-bi. Kali-c. Kreos. Lyc. LYSS. merc-c. NAT-M. PLAT. Rhus-
t. Sabin. SEP. sil. Staph. Sulph. Thuj.
FEMALE GENITALIA/SEX - MENSES - painful - myoma in uterus; from hard and large aur-m-n.
FEMALE GENITALIA/SEX - METRORRHAGIA - fibroids, from aur-m-n. calc-f. calc-p. calc-st-s. Calc. foll.
Ham. Hydr. Hydrin-m. Kali-c. kali-fcy. Kali-i. lap-a. led. lyc. merc. nit-ac. PHOS. Plat. Sabin. sec. sil. sul-
ac. Sulph. Thlas. Tril-p. ust. Vinc.
FEMALE GENITALIA/SEX - METRORRHAGIA - fluid - alternating with clots Plb.
FEMALE GENITALIA/SEX - METRORRHAGIA - fluid APIS apoc. ars. Bell. Both. Carb-v. chin. CROT-H.
Crot-t. Elaps Erig. ferr. Ip. LACH. Mill. nat-m. NIT-AC. PHOS. SABIN. Sec. Sul-ac. Ust.
FEMALE GENITALIA/SEX - PAIN - Vagina - coition - during alumn. apis ARG-N. bell. Berb. borx. Calc-
p. coff. Ferr-m. Ferr-p. Ferr. ham. Hep. hydr. ign. Kali-bi. Kali-c. Kreos. lyc. LYSS. NAT-M. Plat. Rhus-t.
sabin. SEP. sil. Staph. Sulph. Thuj.
FEMALE GENITALIA/SEX - TUMORS - encysted apis bar-c. calc. carbn-s. Graph. Kali-br. kali-c. lyc. nit-
ac. rhod. Sabin. sep. Sil. sulph. Thuj.
FEMALE GENITALIA/SEX - TUMORS - erectile - bleeding arn. coc-c. kreos. lach. Phos. puls. thuj. vac.
FEMALE GENITALIA/SEX - TUMORS - erectile - blue Carb-v.
FEMALE GENITALIA/SEX - TUMORS - erectile - burning calc. Carb-an. Thuj.
FEMALE GENITALIA/SEX - TUMORS - erectile - itching graph. naja Nit-ac.
FEMALE GENITALIA/SEX - TUMORS - erectile - pricking Carb-v.
FEMALE GENITALIA/SEX - TUMORS - erectile - sticking Nit-ac.
FEMALE GENITALIA/SEX - TUMORS - erectile ars. Carb-an. Carb-v. kali-bi. kreos. Lach. lyc. Nit-ac.
Phos. plat. sep. sil. sulph. Thuj.
FEMALE GENITALIA/SEX - TUMORS - hard Carb-v.
FEMALE GENITALIA/SEX - TUMORS - Labia - pointed ozone
FEMALE GENITALIA/SEX - TUMORS - Labia - sensitive to touch; not ozone
FEMALE GENITALIA/SEX - TUMORS - Labia ozone
FEMALE GENITALIA/SEX - TUMORS - Uterus - cysts mag-c. sabin.
FEMALE GENITALIA/SEX - TUMORS - Uterus - myoma - accompanied by - pain; burning Lap-a.
FEMALE GENITALIA/SEX - TUMORS - Uterus - myoma - hard Calc-f. merc-i-r. sil.
FEMALE GENITALIA/SEX - TUMORS - Uterus - myoma - painful viol-o.
FEMALE GENITALIA/SEX - TUMORS - Uterus - myoma abel. Apis arb. Arn. ars-i. ars. Aur-i. Aur-m-n.
aur-m. aur. bell. brom. bry. bufo CALC-F. Calc-i. Calc-p. Calc-s. CALC. Calen. carc. cham. chin. chol.
chr-s. cimic. coenz-q. Con. erod. ferr. fl-ac. foll. frax. graph. ham. helon. hydr. Hydrc. Hydrin-m.
Hydrinin-m. Iod. ip. irid-met. Kali-bi. kali-br. Kali-c. Kali-i. Lach. lap-a. Led. lil-t. lyc. mag-m. med.
Merc-c. merc-i-r. merc. morg-p. nat-m. nit-ac. nux-v. parathyr. PHOS. phyt. plat. plb. puls. rhus-t. sabal
sabin. sang. Sec. sep. SIL. solid. staph. sul-ac. sulph. tarent. ter. teucr. thiosin. thlas. thuj. thyr. tril-p.
tub. ust. vinc. viol-o. x-ray xan. xanth.
FEMALE GENITALIA/SEX - TUMORS arg-met. Calc. coc-c. LYC. Nit-ac.
```

RAPH. rauw. rein. rheum Rhod. Rhus-t. rhus-v. rob. Ruta sabin. samb. sang. sanic. saroth. sars. Sec. Sep.

# **Bibliography**

Gynecologic Malignancies > UTERINE CANCER Harrison's Principles of Internal Medicine Menstrual Disorders and Pelvic Pain > ACUTE PELVIC PAIN

Hypothalamic & Pituitary Hormones > 3. Uterine leiomyomata (uterine fibroids) Basic & Clinical Pharmacology, 13e ... Uterine leiomyomata are benign, estrogen-sensitive, smooth muscle tumors in the uterus that can...

PATHOLOGY

CURRENT

Chapter 17. Pathology of the Male and Female Reproductive Tract and Breast > Leiomyoma (Uterine Fibroids) Pathology: The Big Picture ... Mutations: t(12;14) and del 7. Clinical presentation of leiomyoma: Abnormal uterine bleeding...

Vaginal Bleeding > 1. Fibroids CURRENT Diagnosis & Treatment: Family Medicine, 4e ... Fibroids or leiomyomas are benign uterine tumors that are often asymptomatic. The most common...

Gynecologic Disorders > LEIOMYOMA OF THE UTERUS (Fibroid Tumor) Current Medical Diagnosis & Treatment 2016

Gynecology > Uterine Leiomyomas Schwartz's Principles of Surgery, 10e ... Figure 41-9. Types of uterine myomas. Bleeding is usually heavy and irregular...

Introduction to Women's Imaging > MRI Findings of Uncomplicated Uterine LeiomyomaIntroduction to Diagnostic Radiology ...) but not myometrium. Appearance is compatible with endometrial polyps. Uterine leiomyomas can undergo...

Chapter 9. Pelvic Mass > Classification of Uterine LeiomyomaWilliams Gynecology, 2e ... of growth (Fig. 9-3). Subserosal leiomyomas originate from myocytes adjacent to the uterine serosa...

Obstetrical Hemorrhage > Uterine Leiomyomas Williams Obstetrics, 24e ... Especially if located near the mucosal surface behind the placental implantation site, uterine...

Introduction to Women's Imaging > CASE 16: UTERINE LEIOMYOMAIntroduction to Diagnostic Radiology Introduction to Women's Imaging > Sonographic Findings of Uncomplicated Uterine Leiomyoma

Introduction to Women's Imaging > CT Findings of Uncomplicated Uterine LeiomyomaIntroduction to Diagnostic Radiology ... smooth uterine contour. Enhancement pattern is variable. .Interventional Radiology > DIAGNOSIS

Chapter 38. Complications of Menstruation & Abnormal Uterine Bleeding > Pelvic Ultrasound ScanCURRENT Diagnosis & Treatment: Obstetrics & Gynecology, 11e ... of a uterine fibroid (A) and normal endometrial lining (B). Figure 38–1. Typical ultrasound scan...

Chapter 5. Lower Abdominal Pain in Women > Noninfectious Gynecologic Causes of PainCURRENT Diagnosis & Treatment of Sexually Transmitted Diseases ... such as nonsteroidal anti-inflammatory drugs (NSAIDs) or combined oral contraceptives. Management of uterine...

Chapter 25. Surgical Disorders in Pregnancy > Clinical FindingsCURRENT Diagnosis & Treatment: Obstetrics & Gynecology, 11e ... Uterine leiomyomas are found in 0.1–3.9% of pregnancies. Most women with fibroids during pregnancy...

Gynecology > Leiomyomata CURRENT Diagnosis & Treatment: Surgery, 14e ... Uterine leiomyomata, or fibroids, are present in 20%-30% of women of reproductive age. The true...

Neoplastic Disorders > Leiomyomas Williams Obstetrics, 24e... complications are anticipated. Also known as myomas and somewhat erroneously called fibroids, uterine...

Chapter 9. Pelvic Mass > Leiomyomas Williams Gynecology, 2e .... They are often referred to as uterine myomas, and because their considerable collagen content creates...

Encyclopedia Homoeopathica

Radar 10

CURRENT

CURRENT

CURRENT