

Integrative Management of a Case of Mild Head Injury with Small Hemorrhage in Brain – A Case Report

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ABSTRACT

Head injury is one of the common problems that we are facing from accidents. It can range from mild-to-severe head injuries, among which mild head injury is the most common one. In some cases of mild head injury, there can be an associated brain hemorrhage. In such cases, an integrated approach may benefit the patient. A 55-year-old male who had a mild traumatic head injury with a small hemorrhagic focus in the right parietal region of the brain detected with a CT scan was treated with homeopathic medicine, *Arnica montana*. Along with allopathic medicines, he was advised to take homeopathic medicine. In the next follow-up on repeating the CT scan, there was a disappearance of hemorrhagic foci. This is a case to support integrative approach treatment and is documented with evidence.

Keywords: *Arnica montana*, Brain hemorrhage, Homeopathy, Integrated approach, Mild head injury, Trauma
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INTRODUCTION

There is a dramatic rise in head injuries. Around 1.7 million people suffer from traumatic brain injury every year. Head injury is one of the most common causes of disability and death in adults.^[1] According to the mechanism of injury, a head injury can be classified as a closed and penetrating injury. According to morphology, it can be classified as fractures, focal intracranial injury, and diffuse intracranial injury. According to severity, it can be classified as a mild, moderate, and severe head injury.^[2] The severity of the head injury can be assessed with the help of the Glasgow Coma Scale. Mild head injury patients will have a Glasgow Coma Scale of 13–15. Moderate head injury patients will have a Glasgow Coma Scale of 9–12 and severe head injury patients will be having Glasgow Coma Scale under 8.^[3] Traumatic brain injuries can result in serious consequences of intracranial bleeding. According to the location of bleeding, it can be classified as epidural hemorrhage, subdural hemorrhage, intraparenchymal hemorrhage, and subarachnoid hemorrhage.^[4] A review finding of computed tomography of the head with mild traumatic brain injury concluded that the rate of acute intracranial hemorrhage is 8.5%.^[5]

CASE REPORT

A 55-year-old male patient came with the complaint of a small hemorrhage in the brain diagnosed with a CT scan after a fall from a two-wheeler. On January 28, 2022, the patient met with an accident, where he fell while riding a two-wheeler accidentally. He had a mild head injury with bleeding and multiple abrasions all over his body. After the fall, he had a momentary loss of consciousness. There was no history of ENT bleeding, vomiting, seizures, and fever. The patient was conscious and well oriented. On examination, his blood pressure was 150/110 mm of Hg, pulse was 70 beats/min, afebrile, and his oxygen saturation was 98% [Figure 1]. He was a known hypertensive and hypothyroid patient. He was on telmisartan and thyroxine. Amlodipine 2.5 mg was added since he had high blood pressure [Figure 2]. He was managed in the emergency room and referred to a neurologist. CT revealed a small hyperdense hemorrhagic focus of size 3 mm seen at the right parietal lobe [Figure 3]. Extracranial soft-tissue edema

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was also seen at the right frontoparietal scalp. He was prescribed Zerodol SP, Sompraz D, and Eptoin 100 mg [Figure 4]. He was advised to take the medicines and report after a week.

The next day, he came with the scan report for homeopathy consultation. He was evaluated and his vitals were stable; hence, it was decided to manage him with an integrated approach. He was given *Arnica montana* 200 three pills 4 times a day before food. Since *A. montana* is having action to arrest hemorrhage and absorb hemorrhage, it was prescribed.

Follow-up

Next week on February 5, 2022 on consulting the neurologist, the patient was advised to undergo a CT brain again. CT scan revealed the disappearance of hemorrhage from the right parietal lobe [Figure 5]. Overall the patient improved symptomatically and clinically.

DISCUSSION

Manfred Mueller used *A. montana* in managing brain hemorrhage cases. In his research article, he justified *A. montana's* utility in treating case series such as hemiplegia after hemorrhagic stroke with hematoma, coma and hemiplegia after brain surgery,

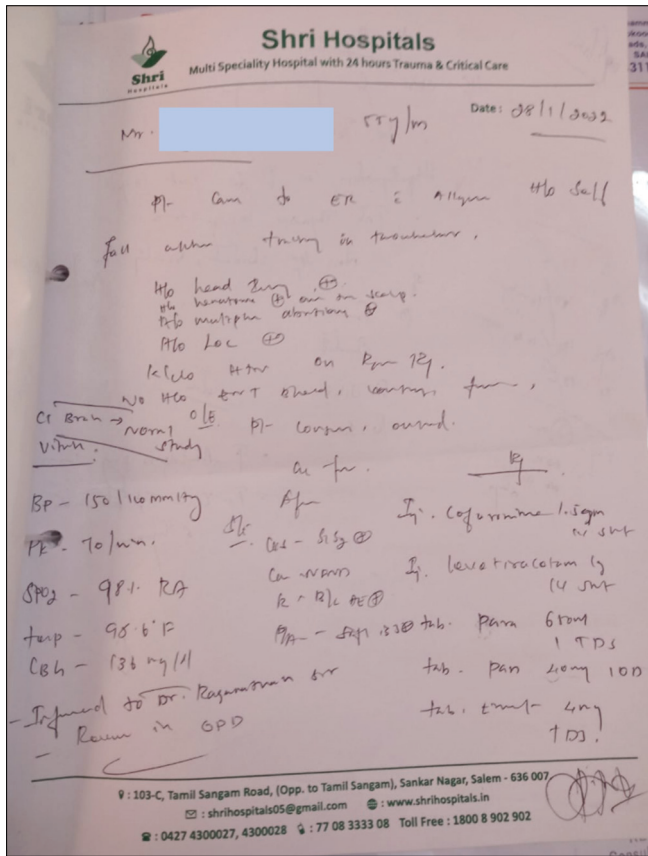


Figure 1: Emergency First Aid Management

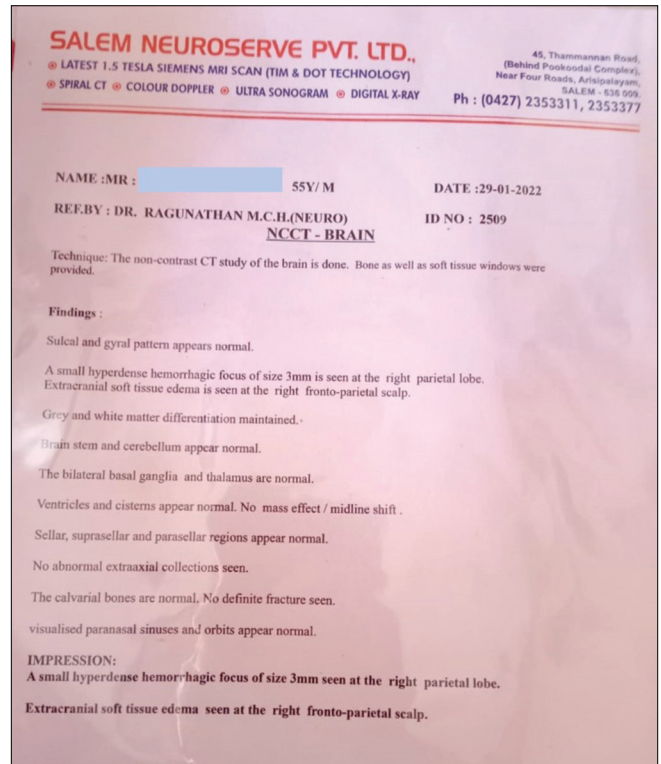


Figure 3: CT Scan before treatment

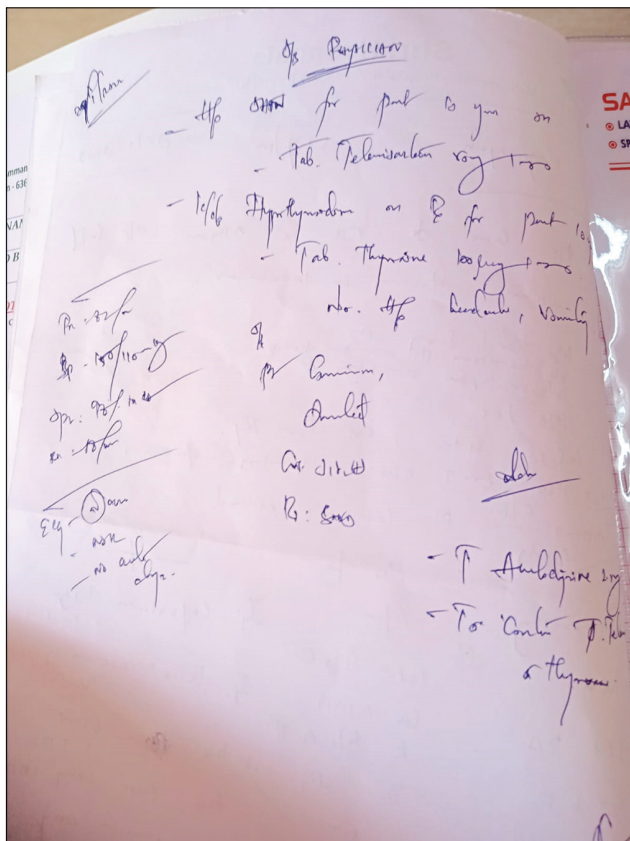


Figure 2: Management after first aid

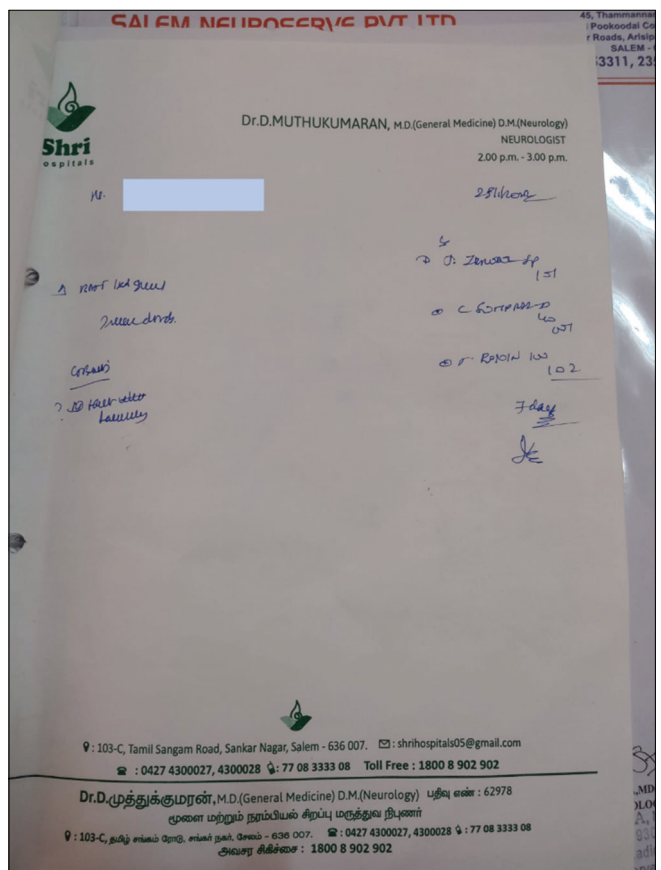


Figure 4: Neurologist first consultation

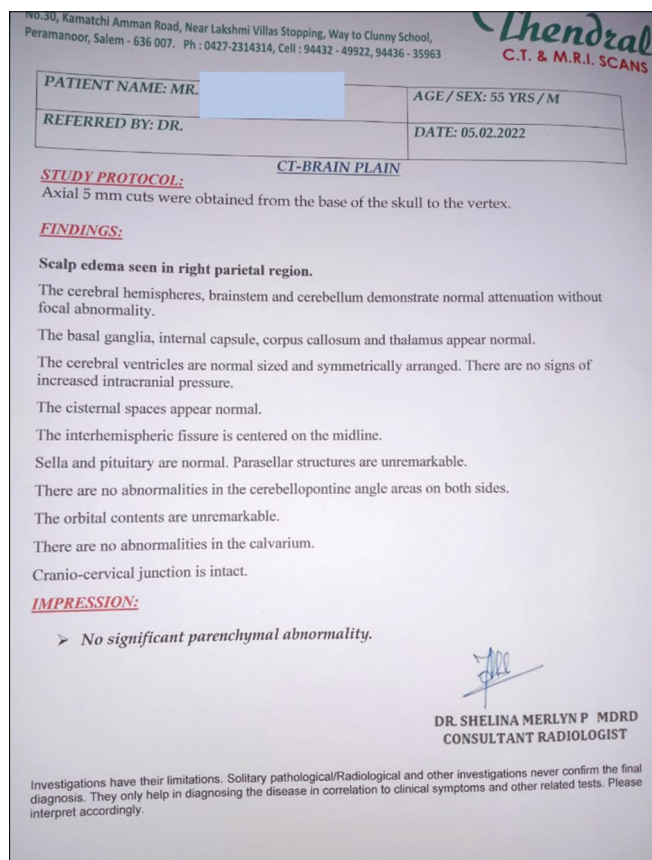


Figure 5: CT Scan after treatment

subarachnoid hemorrhage after a head injury, and subdural hematoma after a fall.^[6]

A randomized, double-blind, and placebo-controlled trial of 60 patients, with a 4-month, follow-up, was conducted at Spaulding Rehabilitation Hospital. The research suggested that homeopathy may have a role in treating persistent mild traumatic brain injuries.^[7]

On the literature review in homeopathy, Arnica is indicated in after-effects of trauma, in both recent and remote injuries. It has specialized property to take care of the effects of falls, especially mechanical injuries.^[8] Arnica is indicated in ecchymosis, and hemorrhages after injuries. Sore, lame, and bruised feelings will be felt in the affected region.^[9] Arnica can be given in injuries like Concussions and Contusions. There may be laceration of soft parts, also it prevents suppuration and promotes healing. In concussions of the brain, when exudation of blood is suspected, Arnica can be given which has therapeutic value of absorption of blood.^[10]

An interprofessional team of neurologists, neurosurgeons, radiologists, neurosurgery nurses, physical therapists, pulmonologists, and allied health specialists together can treat the patients with CNS bleeding.^[3] In this case, the patient had a small hemorrhage in the brain after a fall identified with a CT scan, and initially, he was managed in hospital. As his Glasgow Coma Scale signified that he had a mild head injury and he was managed conservatively. Homeopathic medicine *A. montana* was given along with other allopathic medicines. It helped in arresting, and absorbing hemorrhage from the brain. Here, integrated approach was used to treat the patient.

CONCLUSION

Although homeopathy has less or nil scope in severe head injury conditions, it can be given along with other allopathic medicines in milder head injuries. In some cases, the integrated approach can help the patient and this case is documentary evidence to support the same.

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