

From Injury to Recovery: *Arnica montana* and *Calcarea sulphuricum* in an Elderly Patient with Post-Traumatic Periorbital Ecchymosis

Vijay V. Dabhade ¹, Sandeep Patil ², Deepa Warpudkar- Rajenimbalakar ^{3,*}, Vishal kale ⁴ and Himanshu Karnewar ⁵

¹ Principal P. D. Jain Homoeopathic Medical College, Parbhani.

² Hospital Superintendent P.D Jain Homoeopathic Medical College, Parbhani.

³ M.D PhD P.D Jain Homoeopathic Medical College, Parbhani.

⁴ BHMS M.D Scholar (HMM) Homoeopathic Medical College, Parbhani.

⁵ BHMS RMO P.D Jain Homoeopathic Medical College, Parbhani.

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Abstract

Background: Blunt periorbital trauma in the elderly frequently presents as ecchymosis and lid oedema, often with delayed repair where comorbidities coexist; individualised homoeopathy offers a low-risk option.

Case: An 82-year-old man presented one day after blunt right-eye trauma in a road traffic accident, with periorbital ecchymosis, lid oedema, bilateral pitting pedal oedema and exertional breathlessness, on a background of hypertension, diabetes, coronary angioplasty (2002) and right-sided deafness.

Intervention: *Arnica montana* 30 was given for the acute traumatic ecchymosis; *Calcarea sulphuricum* 30 was added at follow-up for tissue support. Three visits showed marked, photographically documented improvement with no adverse events.

Conclusion: *Arnica montana*, supported by *Calcarea sulphuricum*, was effective in this elderly, co-morbid patient, illustrating Hahnemann's distinction between mechanical and dynamic aid in trauma (Organon, Aphorism 186).

Keywords: *Arnica montana*; *Calcarea sulphuricum*; Periorbital ecchymosis; Homoeopathy; Trauma; Organon Aphorism 186; Case report; Geriatric

1. Introduction

Trauma-related ecchymosis is common in the elderly, where fragile capillaries and comorbidity delay healing. *Arnica montana* (Compositae) is the pre-eminent remedy for mechanical injury; *Calcarea sulphuricum*, tissue salt, supports connective-tissue repair. Aphorism 186 of the Organon distinguishes mechanical (surgical) aid for structural damage from dynamic (homoeopathic) aid when the vital force itself reacts to injury [9,10,11]. This report describes the sequential use of both remedies in an elderly patient with post-traumatic periorbital ecchymosis, framed against this Hahnemannian model, as a teaching case.

* Corresponding author: Deepa Warpudkar- Rajenimbalakar

2. Case Report

- **Patient/History:** An 82-year-old retired accountant, active and independent, presented to the OPD of P.D. Jain Homoeopathic Medical College one day after right-eye trauma sustained in a public-bus accident. Past history: hypertension, diabetes, coronary angioplasty (2002), right-sided deafness; personal history notable for long-standing tobacco-chewing. Appetite, motion and urine clear.
- **Complaints/Examination:** Right periorbital swelling with bluish-black ecchymosis; bilateral pitting pedal oedema; breathlessness on walking and sun exposure. No fracture, laceration or active haemorrhage — mechanical/surgical aid was therefore not indicated.
- **Analysis:** Clear traumatic causation with characteristic bruised discolouration indicated *Arnica montana* first; persistent swelling with age/comorbidity indicated *Calcarea sulphuricum* as a complementary tissue-repair remedy.

Table 1 Follow up and Clinical Observation

Date	Follow-up	Prescription	Clinical Observation
10/06/2026	First visit	<i>Arnica montana</i> 30, single dose	Acute post-traumatic periorbital ecchymosis of right eye, lid oedema; remedy selected on the basis of causation (blunt trauma) and characteristic bruised, black-and-blue discolouration.
17/06/2026	First follow-up	<i>Arnica montana</i> 30 + <i>Calcarea sulphuricum</i> 30	Partial resolution of ecchymosis and lid swelling. <i>Calcarea sulphuricum</i> 30 added as an intercurrent/constitutional remedy for tissue repair and connective-tissue support in an elderly, diabetic, hypertensive patient with bilateral pedal oedema.
24/06/2026	Second follow-up	<i>Arnica montana</i> 30 continued	Marked improvement documented photographically; near-complete resolution of discolouration and oedema around the right eye.

Marked, photographically documented improvement was seen by the third visit, with no adverse effects at any stage.



3. Discussion

- **Hahnemann's Aphorism 186:** The Organon divides injury management into two domains [9,10,11]. Gross structural derangement — fracture, gaping wound, uncontrolled bleeding, retained foreign body — needs mechanical aid (reduction, suturing, haemostasis), the province of surgery [10]. Where the whole organism reacts — shock, disproportionate pain, fever, or, as here, ecchymosis and oedema without structural compromise — dynamic treatment via the homoeopathic remedy is indicated [10,11]. Examination here excluded fracture or laceration, so the bruising, lid oedema and reactive state were purely dynamic disturbances following mechanical insult, placing the case within the second limb of Aphorism 186 and justifying Arnica as sole initial treatment.
- ***Arnica montana*:** The traumatic remedy par excellence for mechanical/mental injury, recent or remote, with particular usefulness in retinal congestion, haemorrhage and ocular ecchymosis [1,5,6]. Choudhuri notes its absorbent action on shock — every minor injury tending to a black-and-blue mark, closely mirroring this case [2]; Boger and Burt correlate its tonic, physiological and traumatic action [3,4]; Boericke's keynote confirms ecchymosis with a sore, bruised feeling [6]. Conventional trials of topical/oral Arnica for post-surgical ecchymosis are mixed — several placebo-controlled studies in blepharoplasty, rhinoplasty and hand surgery show no benefit [12,13,14], others report positive effects on bruising resolution [15] — but this literature concerns non-individualised, low-potency topical use, distinct from the individualised, centesimal-potency oral prescribing illustrated here.
- ***Calcarea sulphuricum*:** A deep-acting Schuessler tissue salt for connective tissue, indicated in bruises, slow-healing wounds and strained tissue [7,8]. Added at follow-up, it complemented Arnica by supporting repair in a patient with reduced physiological reserve. The staged sequence — causation-based Arnica followed by tissue-supportive *Calcarea sulphuricum* — reflects Hahnemann's principle of individualising to the evolving totality of symptoms [9], read alongside Aphorism 186's mechanical/dynamic distinction [9,10,11], and is consistent with the marked recovery observed.

4. Conclusion

Individualised prescribing — *Arnica montana* for acute traumatic ecchymosis, with *Calcarea sulphuricum* supporting tissue repair — produced marked improvement in this elderly, co-morbid patient. Framed against Aphorism 186, the case illustrates how a purely dynamic post-traumatic disturbance, absent structural injury requiring mechanical aid, may be managed effectively through classical materia medica principles, and serves as a useful teaching example for geriatric trauma.

Compliance with ethical standards

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Disclosure of conflict of interest

No conflict of interest to be disclosed.

Statement of ethical approval

Ethical approval was obtained

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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