Treatment of Postoperative Sore Throat With the Aid of the Homeopathic Remedy Arnica montana: A Report of Two Cases

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Abstract
We present 2 cases of severe postoperative sore throat, hoarseness, aphony, and dysphagia, after a laryngeal mask insertion, who were treated successfully with the homeopathic remedy Arnica montana. Three doses of Arnica montana 200CH were given to the patients over 36 hours. Although the symptoms were very intense, the remedy was very effective and cleared most of the symptoms in 48 hours.

Keywords
postoperative sore throat, Arnica montana, homeopathy

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Sore throat is a common postoperative complaint. Its incidence, after tracheal intubation, varies from 14.4% to 50%, and after laryngeal mask insertion, it varies from 5.8% to 34%.¹ Hematoma of the left vocal cord is the most common injury that causes this symptom.² Symptoms can last from a few hours to no more than 2 days, but in more severe cases, symptoms can last up to many weeks and are resistant to current medical treatment.³

Arnica montana is a plant belonging to the Compositae family that grows in East and Central Europe. Its anti-inflammatory action is linked to the lactone helenalin, which seems to be involved in the inhibition of the pro-inflammatory transcription factor nuclear factor kappa-beta.⁴ Arnica montana is a Homeopathic Remedy primarily indicated when there is an injury that results from a blunt instrument, causing hematoma.⁵ Recent research has shown the effectiveness of Arnica montana given in homeopathic potencies in many clinical conditions,⁶ and also in the gene expression.⁷

We present 2 cases of postoperative sore throat with severe hoarseness and aphasis after minor surgical interventions using the laryngeal mask airway. Both these cases were treated successfully with the use of the homeopathic remedy Arnica montana.

Case 1
A 68-year-old woman, under general anesthesia using the laryngeal mask airway, underwent a minor 30-minute operation for the excision of a benign breast cyst. Her medical record was clear—she only suffered from mild glaucoma and mild knee osteoarthritis. Immediately after the operation, she complained of throat pain and hoarseness. Both the surgeon and the anesthetist reassured her that this was a minor complication that would disappear in the next 48 hours. She was discharged 12 hours after the operation with ibuprofen prescription. Over the next 2 days the symptoms became worse. She could barely speak and could not eat solid food, even yogurt. She could only drink water and warm milk in very small amounts. Her voice could be barely heard—in fact it was only a very low whisper. She had the impression that there was a “lump” in her throat, preventing her to speak or drink. For 36 hours after the operation, she was only able to drink no more than 100 mL of water and warm milk in small spoonfuls. The relatives started to worry that the patient had been dehydrated. The anti-inflammatory medication did not seem to have any effect, and the anesthetist suggested starting oral corticosteroids.

On the basis of the assumption that the patient’s symptoms were caused by injury and hematoma to the laryngeal area by

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the insertion of the laryngeal mask, we prescribed *Arnica montana* in the 200CH potency. After 6 hours the patient’s condition was much better. She started talking more easily and could eat yogurt and soup. A second dose of the remedy resulted in progressive improvement of her clinical condition. She was able to eat semisolid food, with plenty of liquids (water, milk, and juices). She could even eat small mouthfuls of bread. The voice was much better, still hoarse, but louder and painful. She needed only one more dose of *Arnica montana* 200CH, 24 hours after the initial dose, as most of the symptoms disappeared, except for some hoarseness that lasted about 7 more days.

**Case 2**

A 27-year-old male basketball player underwent arthroscopy of his left knee for a medial meniscus rupture, under general anesthesia, using the laryngeal mask airway. He was, otherwise, fit and well. The 20-minute operation was uneventful, but immediately after, the patient complained of severe sore throat and hoarseness. The symptoms deteriorated over the next 12 hours progressing to almost complete aphony. He was not able to take any solid food and even water would cause a lot of discomfort and pain. The anesthesiologist’s advice was oral diclofenac and prednisolone.

Bearing in mind the first case (it was just 4 months after the first one), we decided not to wait and prescribed *Arnica montana* 200CH. Again, the improvement of the patient’s symptoms was significant and rapid. Initially, his voice became more loud and clear, and in just 4 hours he was able to start taking some liquid food and water. He needed another 2 doses of the remedy, in the same potency, over the next 24 hours, and the symptoms almost disappeared just 4 days after the surgery.

**Discussion**

The symptoms of postoperative throat discomfort, such as sore throat, hoarseness, and dysphagia, are common and are associated with trauma to the local tissue of the larynx and pharynx. It has also been shown that short-term intubation associated with trauma to the local tissue of the larynx and pharynx. The symptoms of postoperative throat discomfort, such as sore throat, hoarseness, and dysphagia, are common and are associated with trauma to the local tissue of the larynx and pharynx. The symptoms of postoperative throat discomfort, such as sore throat, hoarseness, and dysphagia, are common and are associated with trauma to the local tissue of the larynx and pharynx. The symptoms of postoperative throat discomfort, such as sore throat, hoarseness, and dysphagia, are common and are associated with trauma to the local tissue of the larynx and pharynx. The symptoms of postoperative throat discomfort, such as sore throat, hoarseness, and dysphagia, are common and are associated with trauma to the local tissue of the larynx and pharynx.

Although the symptoms are predominant in the early postoperative period, they can remain over a longer period of time, with 3% to 11% of patients having symptoms even after 96 hours. The therapeutic measures that have been used for this condition include topical application of nonsteroidal anti-inflammatory agents, topical cortisone or lidocaine, intravenous cortisone, inhalation of cortisone agents, or systematic anti-inflammatory medication postoperatively.

The Therapeutic System of Homeopathy was founded by German doctor Samuel Christian F. Hahnemann (1755-1843). The word “homeopathy” is made up of the Greek words “omoios,” meaning “similar,” and “pathos,” meaning “disease.” Hahnemann’s main principle of homeopathy was that the cure of a particular disease is achieved through the use of pharmaceutical substances that, when administered to a healthy person, produce symptoms similar to those of the disease in question: “similia similibus curentur,” meaning “likes are cured by likes.” This idea was first mentioned by Hippocrates and then by Paracelsus.

Ernst and Pittler in a review article in 1998 concluded that the claim that homeopathic *Arnica* is efficacious beyond a placebo effect was not supported by rigorous clinical trials. Nevertheless, since then various randomized, placebo-controlled, double-blinded trials showed the effectiveness of homeopathic *Arnica* in various fields of medicine. Iannitti et al, in 2016, published a review study overviewing the literature from 1997 to 2013, focusing on the preclinical and clinical use of *Arnica* for the treatment of inflammatory conditions, in pain management, and in postoperative settings. The conclusion of the review was that *Arnica montana* is more effective than placebo for the treatment of several conditions including posttraumatic and postoperative pain, edema, and ecchymosis, suggesting that *Arnica montana* may represent a valid alternative to nonsteroidal anti-inflammatory drugs, at least when treating some specific conditions.

Even more recently, Sorrentino et al, in 2017, showed that *Arnica montana* in the homeopathic potency of 1000K reduces postoperative blood and seroma collection in women undergoing unilateral total mastectomy.

From our knowledge, the 2 cases reported in this article are the first reports published concerning the use of a homeopathic remedy for the treatment of postoperative sore throat. The prescription of the remedy was based on the causative factor. Both the patients did not have any major health problem or sensitivity, so the potency of 200CH seemed reasonable. In both cases 2 repetitions of the remedy was given, when, clinically, we had the impression that the improvement of the previous dose seemed to wear off.

According to Vithoulkas, when prescribing for an acute case, the homeopath need only prescribe on the dramatic symptoms of the acute phase and ignore the underlying symptoms belonging to the chronic state, whereas prescribing according to the causative factor is one of the basic strategies for homeopathic prescribing.

**Conclusion**

Postoperative sore throat and hoarseness is a common situation that can sometimes cause significant morbidity. The 2 cases presented in this article show that prescribing according to the basic laws of classical homeopathy could be a valuable tool when dealing with this condition. Further research will definitely be needed to evaluate the efficacy of *Arnica montana* and other homeopathic remedies for the treatment of this pathology. We hope that these 2 cases would provide the motivation for conducting a clinical trial for the use of homeopathic remedies for the treatment of postoperative sore throat.
Author Contributions
Both authors conducted the study with the Supervision of Prof. Vithoulkas.

Declaration of Conflicting Interests
The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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Ethical Approval
For both the two cases, informed consent was obtained from both the patients.

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