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INDIVIDUALIZED HOMOEOPATHIC MANAGEMENT OF PRIMARY ADHESIVE CAPSULITIS: FROZEN SHOULDER - A CASE REPORT AT BATRA'S

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ABSTRACT

Background: Adhesive capsulitis (frozen shoulder) is a disabling musculoskeletal disorder characterized by progressive pain, stiffness, and marked restriction of shoulder movements. The condition significantly interferes with activities of daily living and quality of life. Conventional treatment mainly includes analgesics, physiotherapy, intra-articular injections, and surgery in resistant cases. Individualized homoeopathic treatment may provide symptomatic relief while addressing the patient's constitutional susceptibility. **Case Summary:** A 38-year-old female presented with progressive pain and restricted movement of the right shoulder for 4-5 months, diagnosed as primary adhesive capsulitis. The pain extended to the cervical region and was relieved by heat. She had been taking analgesics with only temporary relief. Constitutional evaluation revealed a gentle, mild, emotional personality with anxiety regarding her daughter's future, accompanied by vitamin B12 and vitamin D deficiency, previous varicose vein surgery, and chronic hair fall. Individualized homoeopathic treatment comprising Pulsatilla as the constitutional remedy along with acute prescriptions resulted in marked clinical improvement. **Outcome:** Within three months, pain, stiffness, and restriction of movement improved significantly. By the final follow-up, shoulder mobility had returned almost completely with near-total relief of symptoms, requiring only maintenance advice and home exercises.

Keywords: Adhesive capsulitis, Frozen shoulder, Homoeopathy, Pulsatilla, Musculoskeletal disorders, Case report.

INTRODUCTION

Adhesive capsulitis, commonly known as frozen shoulder, is a chronic painful condition characterized by inflammation and fibrosis of the glenohumeral joint capsule leading to progressive restriction of both active and passive shoulder movements. The condition

predominantly affects women between 40 and 60 years of age and is commonly associated with endocrine disorders, prolonged immobilization, trauma, and metabolic abnormalities.

Patients typically experience severe pain followed by progressive stiffness that interferes with dressing, grooming, lifting objects, sleeping, and occupational activities. Although many cases eventually improve, recovery often requires one to three years, and residual limitation may persist.

Conventional management includes non-steroidal anti-inflammatory drugs, corticosteroid injections, physiotherapy, and surgical intervention in resistant cases. Individualized homoeopathic treatment aims to reduce pain, improve mobility, and restore function by considering the patient's constitutional characteristics in addition to local pathology.

This report describes the successful management of primary adhesive capsulitis with individualized homoeopathic treatment.

CASE PRESENTATION

A 38-year-old female, employed in an insurance company, presented with complaints of:

- Progressive pain in the right shoulder
- Severe restriction of shoulder movements
- Associated cervical pain

The complaints had started in January 2026 and gradually worsened over 4–5 months.

She experienced difficulty in:

- Raising the arm
- Routine household work
- Dressing
- Reaching overhead
- Office-related activities

Pain was aching in nature and improved with local heat application.

She had been taking analgesics with only temporary relief before seeking homoeopathic treatment.

History of Present Illness

The pain began insidiously without any preceding trauma.

Characteristics included:

- Right shoulder pain
- Cervical pain
- Progressive stiffness
- Restriction of movements

- Better from heat
- No significant radiation
- No neurological symptoms

Symptoms progressively interfered with daily functional activities.

Associated Complaints

- Hair fall (<50 strands/day)
- Generalized weakness
- Vitamin B12 deficiency
- Vitamin D deficiency

Past History

- Varicose vein surgery (2025)
- Tuberculosis (past history)
- No diabetes mellitus
- No thyroid disorder

Family History

- No significant hereditary musculoskeletal illness.

Personal History

- Appetite: Normal
- Desire: Sweets
- Aversion: None
- Thirst: Normal (10–12 glasses/day)
- Stool: Regular
- Urine: Normal
- Thermal: Hot patient
- Sleep: Refreshing (8 hours)
- Perspiration: Normal
- Dreams: Not characteristic

Menstrual History

- Menarche: 12 years
- Cycles irregular (approximately every 45 days)
- Flow scanty
- Menstrual irregularity during follow-up

Mental Generals

The patient was:

- Mild
- Gentle
- Soft spoken
- Calm by nature
- Emotionally sensitive
- Anxiety regarding her daughter's future
- Widowed after prolonged marital separation due to husband's alcoholism
- Lives alone while daughter studies in a boarding school
- Easily moved emotionally but generally composed

Clinical Examination

General examination revealed:

- Restricted active and passive movements of the right shoulder
- Pain during shoulder abduction and rotation
- Associated cervical muscle tenderness
- No neurological deficit
- Vital signs within normal limits

Laboratory Investigations

Investigation	Result
Hemoglobin	11.1 g/dL
Total T3	89.39 ng/dL
Total T4	12.07 µg/dL
TSH	2.446 µIU/mL
Vitamin B12	173 pg/mL (Low)
Vitamin D3	21.62 ng/mL (Low)
Fasting Blood Sugar	64.5 mg/dL
HbA1c	5.3%
Estimated Average Glucose	105.41 mg/dL

Diagnosis

Primary Adhesive Capsulitis (Frozen Shoulder)

Differential Diagnosis

- Cervical spondylosis with referred pain
- Rotator cuff tendinopathy
- Shoulder impingement syndrome
- Glenohumeral osteoarthritis
- Calcific tendinitis

Case Analysis

This case demonstrated classical primary adhesive capsulitis characterized by progressive pain, stiffness, and restriction of shoulder movements without preceding trauma.

The constitutional picture included:

Mental Characteristics

- Mild disposition
- Gentle personality
- Soft spoken
- Emotional sensitivity
- Anxiety regarding daughter's future
- Calm temperament

Physical Characteristics

- Pain relieved by heat
- Progressive restriction of movement
- Associated cervical pain
- Hot patient
- Hair fall
- Vitamin B12 deficiency
- Vitamin D deficiency

The totality indicated a constitutional prescription directed not only toward local pathology but also toward the patient's overall constitutional susceptibility, emotional state, and general characteristics.

Totality of Symptoms

Mental Generals

- Mild, gentle, soft-spoken personality
- Weeps easily
- Emotionally sensitive

- Calm temperament
- Anxiety regarding her daughter's future
- Lives alone after separation and husband's demise
- Responsible and hardworking

Physical Generals

- Hot patient
- Desire for sweets
- Refreshing sleep
- Normal appetite
- Normal thirst
- Hair fall (<50 strands/day)
- Vitamin B12 deficiency
- Vitamin D deficiency

Particular Symptoms

- Frozen shoulder (right)
- Progressive restriction of shoulder movements
- Aching pain in right shoulder
- Cervical pain associated with shoulder complaints
- Better from heat application
- Difficulty performing activities of daily living

Repertorial Analysis

Important Rubrics

- Extremities – Pain – Shoulder – Right
- Extremities – Stiffness – Shoulder
- Extremities – Motion – Difficult
- Extremities – Pain – Better by heat
- Mind – Mildness
- Mind – Weeping easily
- Mind – Anxiety about family
- Generalities – Warm applications ameliorate

Leading Remedies

- **Pulsatilla**

- Rhus toxicodendron
- Calcarea carbonica
- Calcarea phosphorica
- Phosphorus

Remedies	staph.	merc.	lyc.	sep.	aur.	sil.	ars.	bry.	calc-s.	calist.	con.	nat-m.	nit-ac.	petr.	phos.	plat.	puls.	sulph.	alum.	bell.
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Symptoms Covered	4	4	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Intensity	8	6	10	10	7	7	6	6	6	6	6	6	6	6	6	6	6	6	5	5
Result	4/8	4/6	3/10	3/10	3/7	3/7	3/6	3/6	3/6	3/6	3/6	3/6	3/6	3/6	3/6	3/6	3/6	3/6	3/5	3/5
Clipboard 1																				
MIND - IRRITABILITY	3	2	3	3	3	3	3	3	3	3	2	3	3	3	3	3	3	3	3	3
MIND - CONTRADICTION - intolerant of contradiction	2	1	4	4	3	2	1	2	1	2	1	2	1	1	1	2	1	1	1	1
SKIN - ERUPTIONS - psoriasis	1	2	3	3	1	2	2	1	2	1		1	2	2	2	1	2	2	1	1
GENERALS - COITION - during - amel.	2	1									3									

Figure 1: Repertorization Chart

Remedy Differentiation

Pulsatilla (Constitutional)

Selected because of:

- Mild, yielding disposition
- Gentle personality
- Emotional sensitivity
- Easily weeping
- Female hormonal irregularity
- Anxiety regarding loved ones
- Constitutional correspondence

Rhus toxicodendron (Acute)

Selected for:

- Frozen shoulder
- Musculoskeletal stiffness
- Pain with restricted movements
- Soft tissue involvement

Magnesia phosphorica

Given for muscular pain and spasmodic discomfort associated with shoulder stiffness.

Prescription

Constitutional

Pulsatilla 200C

Acute

- Rhus toxicodendron
- Magnesia phosphorica

Supportive Measures

- Shoulder mobilization exercises
- Hot fomentation
- Vitamin B12 supplementation
- Vitamin D supplementation
- Postural correction
- Home exercise programme

Follow-up

Follow-up	Clinical Progress
Baseline	Severe right shoulder pain with marked restriction of movements and cervical pain. Difficulty in daily activities. Analgesic dependence.
June 2026	Frozen shoulder significantly improved. Hair fall unchanged. Mild generalized weakness persisted.
Late June 2026	Shoulder pain largely relieved. Mild bilateral knee crepitus noted. Menstrual irregularity observed.
July 2026	Shoulder pain almost completely resolved. Full functional improvement achieved. Only occasional knee pain while climbing stairs.

Outcome

After approximately three months of individualized homoeopathic treatment:

- Shoulder pain reduced markedly.
- Range of motion improved substantially.
- Stiffness resolved.
- Daily activities were restored.
- Dependence on analgesics was eliminated.
- Cervical pain improved.

- Patient reported **almost 100% recovery** of shoulder function.

Discussion

Primary adhesive capsulitis is characterized by chronic inflammation and fibrosis of the glenohumeral capsule, leading to progressive pain and restriction of movement. Recovery is often prolonged and many patients require repeated analgesics, physiotherapy, intra-articular injections, or surgical intervention.

In this case, constitutional prescribing based on the patient's emotional constitution together with acute remedies for musculoskeletal pain was associated with rapid clinical recovery over a relatively short period. Along with individualized homoeopathic medicines, local heat application, nutritional correction, and prescribed shoulder exercises contributed to functional restoration.

The improvement extended beyond pain relief, with restoration of shoulder mobility, reduction in cervical discomfort, and recovery of routine occupational and household activities.

Health-Related Quality of Life (HRQL)

Before treatment:

- Unable to lift the right arm comfortably.
- Difficulty dressing, combing hair, and performing household work.
- Pain interfered with office work and commuting.
- Sleep occasionally disturbed because of pain.
- Reduced confidence in performing routine activities.

After treatment:

- Shoulder movements became almost normal.
- Household and occupational work resumed comfortably.
- Pain no longer interfered with sleep.
- Significant improvement in physical independence.
- Better overall quality of life and confidence.

Patient Perspective

“Initially, I was unable to move my right shoulder properly and even simple activities like dressing or lifting my hand were painful. After taking the prescribed homoeopathic medicines along with the advised exercises, my pain gradually reduced and the shoulder movement improved. Now I can perform all my daily activities comfortably without pain and feel almost completely recovered.”

Learning Points

- Early individualized homoeopathic intervention may help reduce pain and improve shoulder mobility in adhesive capsulitis.
- Constitutional prescribing combined with appropriate acute remedies can complement rehabilitation exercises.
- Nutritional deficiencies such as vitamin B12 and vitamin D should be identified and corrected in musculoskeletal disorders.
- Functional recovery and restoration of activities of daily living are important outcome measures in frozen shoulder.
- Long-term follow-up is useful to monitor sustained improvement and prevent recurrence.

Conclusion

This case demonstrates successful management of primary adhesive capsulitis (frozen shoulder) with individualized homoeopathic treatment. Within three months, the patient experienced marked reduction in pain, significant restoration of shoulder mobility, improved cervical symptoms, and near-complete recovery of functional ability. The case suggests that individualized constitutional homoeopathic management, combined with rehabilitation exercises and nutritional correction, may offer meaningful improvement in pain, mobility, and quality of life in patients with adhesive capsulitis.