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HOMOEOPATHIC MANAGEMENT OF CHRONIC GASTRITIS WITH RECURRENT ORAL ULCERATION IN A 14-YEAR-OLD GIRL: A CASE REPORT AT DR BATRA'S

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Abstract

A 14-year-old girl presented with recurrent gastritis and multiple painful oral ulcers involving the tongue and inner cheeks. Although the oral ulcers had initially occurred intermittently, there was a marked aggravation during the month preceding consultation, with 3-4 ulcers appearing simultaneously and a tendency to spread rapidly. The ulcers were associated with burning and pain, particularly after eating or drinking. Gastrointestinal complaints included burning in the epigastrium, bloating, hyperacidity and intermittent flatulence, with a past tendency to constipation and abdominal bloating.

The patient had a history of constipation during early childhood, dengue at 3 years of age and urinary tract infection approximately two years previously. No previous treatment had been taken specifically for the present complaints. Her appetite was good, with a preference for non-vegetarian food and sweets and an intake of more than 1 litre of water daily.

The case demonstrated prominent mental and general characteristics including anxiety, restlessness, hyperactivity, easy anger with shouting, distractibility, reserved behaviour, and concern regarding studies. Repertorial analysis showed **Arsenicum album** prominently represented in the totality. **Arsenicum album** was selected as the constitutional remedy, while **Carbo vegetabilis** was used as the acute remedy for the acute gastric symptom complex, according to the case record.

During follow-up, there was progressive improvement in both the oral and gastric complaints. Subsequently, the patient reported complete disappearance of the mouth ulcers and burning in the mouth, resolution of epigastric burning, bloating and fullness, improvement in appetite and

improvement in overall well-being. At follow-up, menstrual cycles were regular and she had adopted healthier dietary and lifestyle practices.

Keywords

Gastritis; oral ulceration; recurrent aphthous-like ulcers; dyspepsia; Arsenicum album; Carbo vegetabilis; individualized homoeopathy; adolescent; case report

Patient Information

Table 1: Patient Information

Parameter	Details
Age	14 years
Sex	Female
Occupation	Student
Educational level	10th standard
Diagnosis/Presenting condition	Gastritis with recurrent oral ulceration
Main sites of ulceration	Tongue and inner cheeks
Duration	Several months, with marked aggravation over approximately 1 month
Acute gastric symptoms	Burning epigastrium, bloating, flatulence
Constitutional remedy	Arsenicum album
Acute remedy	Carbo vegetabilis
Appetite	Good initially; later improved further after treatment
Food preference	Non-vegetarian food, sweets
Thirst	More than 1 L/day
Past history	Constipation in childhood, dengue at 3 years, UTI 2 years previously
Family setting	Only daughter, lives with parents
Family relationship	Good

Chief Complaints

The patient presented with **gastritis associated with recurrent oral ulceration**.

She reported that mouth ulcers had been occurring intermittently for several months. Initially, the episodes were occasional, but during the month preceding consultation the condition had become significantly worse.

She was developing approximately **3–4 ulcers at a time**, involving:

- Tongue
- Inner aspect of the cheeks

The ulceration was perceived to be increasing rapidly.

Characteristic oral symptoms

Table 2: Characteristic oral symptoms

Feature	Patient's presentation
Number	Approximately 3–4 ulcers
Location	Tongue and inner cheeks
Pain	Present
Burning	Present
Aggravation	Eating or drinking
Oozing	Not significant
Course	Recurrent, recently aggravated
Spread	Increasing number of ulcers during aggravation

The burning sensation after eating or drinking was particularly troublesome.

Gastric Complaints

The oral complaints were associated with significant digestive symptoms.

The patient experienced:

- Indigestion
- Burning in the epigastrium
- Hyperacidity
- Bloating
- Flatulence
- Occasional constipation
- Frequent urge to pass stool soon after eating

The digestive symptoms were sufficiently troublesome that the patient developed concern regarding food intake.

Her appetite was reduced at one stage because of the **fear of aggravating the oral ulcers**.

History of Present Illness

The patient had been experiencing recurrent oral ulceration for several months.

Initially, the ulcers appeared intermittently and were self-limiting. Over the preceding month, however, there was a noticeable increase in frequency and severity.

Multiple ulcers appeared simultaneously and were associated with burning and pain. Eating or drinking aggravated the burning sensation.

Along with the oral complaints, she experienced recurrent indigestion, epigastric burning, bloating and occasional flatulence.

There was also a frequent urge to pass stool soon after eating.

The patient had not previously consulted a doctor specifically for these complaints.

Past History

Table 3: Past History

Past event	Details
Constipation	At approximately 5 years of age; stools sometimes absent for 3–4 days
Abdominal symptoms in childhood	Bloating was observed
Dengue	At 3 years of age
Urinary tract infection	Approximately 2 years previously; treated
Previous treatment for current complaint	None reported
Other major history	No significant additional history reported

A history of constipation and abdominal bloating was present from early childhood.

Personal History

Table 4: Personal History

General	Findings
Appetite	Good
Food preference	Non-vegetarian food
Desire	Sweets
Water intake	More than 1 litre/day
Urine	Normal
Stools	Satisfactory at presentation; previous tendency to constipation
Sleep	7–8 hours, refreshing
Perspiration	Normal
Odour	Non-offensive
Thermal state	Ambithermal
Bathing preference	Hot water
Seasonal preference	All seasons
Fan	Desires fan

The patient subsequently made substantial dietary changes, including avoidance of junk, spicy and oily foods and increased water intake.

Family History and Family Environment

The patient is the **only daughter** and lives with her father and mother.

The family relationship was described as good.

Her father works abroad and is not continuously at home. The patient described her father as an important emotional figure in her life.

One of her happiest experiences was when her father came down to Goa.

The family environment was generally supportive, and no major ongoing family conflict was reported.

Childhood and Academic History

The patient is currently studying in the **10th standard**.

She described herself as:

- Intelligent
- Good in studies
- Actively involved in school activities
- Participative in extracurricular activities

There was no significant history of childhood adversity reported.

She described herself as having a generally good lifestyle and being pampered by her father, who tends to provide what she wants.

Mental and Emotional State

The mental generals formed an important part of the case.

The patient was described as:

- Restless
- Anxious
- Hyperactive
- Easily distracted
- Reserved
- Intelligent
- Easily angered
- Shouting when angry
- Emotionally strong
- Unable to sit at one place for long
- Worried about studies

Anxiety

She reported feeling **anxious most of the time**, particularly in relation to her studies.

Anger

She was described as getting angry easily and expressing anger by **shouting**.

Emotional state

Despite being described as emotionally strong, she did not cry easily.

Restlessness and hyperactivity

A marked tendency toward restlessness was recorded. She found it difficult to remain seated in one place for a prolonged period.

Concentration

She was described as being **easily distracted**.

Social behaviour

Although intelligent and active in school, she was described as relatively **reserved** and did not mix easily with everyone.

Mental Generals – Case Totality

Table 5: Mental Generals – Case Totality

Mental characteristic	Intensity/importance
Restlessness	+++
Anxiety	++
Easily distracted	+++
Anger easily	+++
Shouting during anger	Present
Hyperactivity	+
Reserved	++
Intelligence	++
Emotional strength	+
Concern regarding studies	Present

The combination of **anxiety, marked restlessness, hyperactivity, concern regarding health/complaints, and associated physical symptoms** contributed to the constitutional assessment.

Physical Generals

The physical generals were recorded as follows:

Table 6: Physical Generals

General	Finding
Appetite	Normal/good
Desire	Sweets
Food preference	Non-vegetarian
Thirst	Normal to increased; >1 L/day
Stool	Satisfactory
Urine	Normal
Perspiration	Normal
Perspiration odour	Non-offensive
Thermal state	Ambithermal

General	Finding
Bathing	Hot water
Sleep	7–8 hours
Sleep quality	Refreshing
Sleep position	Back
Seasonal preference	All

Clinical Examination

At follow-up examination:

- Blood pressure: **120/80 mmHg**
- Respiratory system: **Clear**
- Per abdomen: **Soft, non-tender**
- Bowel sounds: **Normal**
- Weight: approximately **35–36 kg**
- ENT examination: reported as clear at follow-up

No acute systemic abnormality was documented at the follow-up visits.

Clinical Totality

The case was considered on the basis of the complete individualised picture rather than the diagnosis alone.

Table 7: Clinical Totality

Domain	Characteristic features
Chief complaint	Recurrent oral ulceration with gastritis
Location	Tongue, inner cheeks, epigastrium
Sensation	Burning, pain
Aggravation	Eating/drinking
Gastric symptoms	Epigastric burning, bloating, flatulence
Stool	Frequent urge after eating; previous constipation
Mental	Anxiety, restlessness, hyperactivity
Behaviour	Easily angered, shouting
Concentration	Easily distracted
Personality	Reserved, intelligent
Food	Desire for sweets; non-vegetarian preference
Sleep	Refreshing
Thermal	Ambithermal

Repertorial Analysis

The repertorial sheet supplied with the case included rubrics relating to the oral pathology and mental generals.

The repertorization particularly represented:

- Tongue – eruptions/growths/cracks/excoriations
- Tongue – pain
- Tongue – eruptions/growths/ulcerations
- Mouth – ulcerations/soreness of mouth
- Mind – emotions, anger, bad news, disappointment, vexation
- Mind – anger, easily
- Mind – mood/disposition, restless, mentally and physically
- Mind – spoken to, wants to be alone

In the repertorial analysis shown, **Arsenicum album** appeared prominently among the leading remedies.

Remedies	ars.	nit-ac.	aur.	cham.	nux-v.	acon.	phyt.	bell.	lach.	nat-m.	arum-t.	bry.	ign.	merc.	ruta.	semp.	coloc.	gels.	kali-bi.	du.
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Symptoms Covered	6	5	5	4	4	4	4	4	4	4	3	3	3	3	3	3	2	2	2	2
Intensity	10	9	5	8	7	5	5	4	4	4	5	4	4	4	3	3	4	4	4	4
Result	6/10	5/9	5/5	4/8	4/7	4/5	4/5	4/4	4/4	4/4	3/5	3/4	3/4	3/4	3/3	3/3	2/4	2/4	2/4	2
Clipboard 1																				
TONGUE - Eruptions, growths - Cracks, excoriations	2	2		1			1	1	1	1	2	1				1			2	
TONGUE - Pain	2	2				1	2	1			1			1	1	1				
TONGUE - Sensation - as if swollen, enlarged					1															
TONGUE - Eruptions, growths - Ulcerations - syphilitic		2	1						1					1					2	
MOUTH - Ulcerations - Soreness of mouth	2	2					1				2			2		1				
MOUTH - Ulcerations																				
MIND - Emotions effects - Anger, bad news, disappointment, vexation	1		1	2	2	1			1	1		2	1				2	2		
MIND - ANGER - easily	1	1	1	3	3	1		1		1		1	1		1		2	2		1
MIND - Mood, disposition - Restless, mentally and physically	2		1	2	1	2	1	1	1	1			2		1					1
MIND - SPOKEN to, averse to being - wants to be let			1																	

Figure 1: Repertorization Chart

Repertorial result

Table 8: Repertorial result

Remedy	Repertorial representation
Arsenicum album	Highest/leading representation in the supplied repertorization
Nitric acid	Strong representation
Aurum	Strong representation
Chamomilla	Represented
Nux vomica	Represented
Belladonna	Represented
Lachesis	Represented
Natrum muriaticum	Represented
Mercurius	Represented
Others	Lower representation

The repertorial findings were interpreted together with the patient's constitutional picture.

Remedy Selection

Constitutional Remedy – Arsenicum album

Arsenicum album was selected constitutionally based on the totality recorded in the case, particularly the mental characteristics of:

- Anxiety
- Restlessness
- Hyperactivity
- Concern/worry
- Need for activity
- Associated physical complaints

The remedy was not selected solely on the basis of gastritis or oral ulceration but from the broader individualised picture.

Acute Remedy – Carbo vegetabilis

Carbo vegetabilis was used as the acute remedy in the case for the acute gastric symptom complex, particularly the picture of:

- Hyperacidity
- Gastric discomfort
- Bloating
- Flatulence

Thus, the case record distinguished between the **constitutional prescription** and the **acute management of the gastric episode**.

Therapeutic Approach

Table 9: Therapeutic Approach

Prescription role	Remedy
Constitutional	Arsenicum album
Acute gastric symptom complex	Carbo vegetabilis

The case record attributes improvement in the overall symptom complex to the individualised prescription, with improvement extending beyond the presenting gastric complaint.

Follow-up and Clinical Outcome

Early follow-up

At follow-up, the patient reported:

- No acute mouth ulcers during the month
- No aggravation of oral ulceration
- No burning in the epigastrium
- No significant bloating
- No significant flatulence
- No constipation
- Regular stools

She was compliant with dietary advice and was avoiding spicy and oily foods.

She was also drinking adequate water.

Subsequent follow-up

The improvement became more pronounced.

The patient reported:

- **Complete clearance of mouth ulcers**
- No burning sensation in the mouth
- Resolution of gum redness
- No bloating
- No sensation of abdominal fullness
- Improved appetite
- Improved taste of food
- Improvement in weight
- Regular menstruation

At this stage, there was no significant recurrence of the original oral complaint.

Outcome at the Latest Documented Follow-up

Table 10: Outcome at the Latest Documented Follow-up

Parameter	Before treatment	Follow-up
Mouth ulcers	3–4 recurrent painful ulcers	Completely cleared
Oral burning	Present	Absent
Oral pain	Present	Absent
Gastritis	Recurrent	Markedly improved/resolved
Epigastric burning	Present	Absent
Bloating	Present	Absent
Fullness	Present	Absent
Flatulence	Intermittent	No significant complaint
Constipation	Occasional/past tendency	Absent
Appetite	Reduced during aggravation	Improved considerably
Taste of food	Affected	Improved
Menstrual cycle	Not specifically reported as problematic	Regular/monthly
Diet	Previously less controlled	Avoiding junk, spicy and oily food
Water intake	>1 L/day	Plenty of water
Physical activity	Not specifically documented initially	Walking and deep-breathing exercises

Lifestyle Changes During Follow-up

The patient's improvement was accompanied by positive lifestyle modifications.

She reported:

- Stopping junk food
- Avoiding spicy foods
- Avoiding oily foods
- Drinking plenty of water
- Regular walking
- Deep-breathing exercises
- Better attention to diet
- Reduced stress

These changes were maintained alongside the prescribed treatment.

Patient Perspective

Before treatment, the patient and her parents were **very worried about her health**, particularly because of the recurrent oral ulcers and associated digestive complaints.

The recurrent ulcers affected her eating habits and contributed to concern about food aggravating the condition.

With improvement, the patient and family reported satisfaction with the progress.

At follow-up, she was described as **completely fine**, with complete clearance of the mouth ulcers and substantial improvement in digestive symptoms.

She was also happy that she could eat more normally without experiencing the previous aggravation.

Clinical Course in Summary

The clinical course showed progressive improvement from recurrent painful oral ulceration and gastric symptoms to complete disappearance of the oral ulcers and resolution of the major digestive complaints documented at follow-up.

Discussion

This case illustrates the importance of considering the **individual patient as a whole** when assessing a chronic multisystem complaint.

The presenting diagnosis alone—gastritis with oral ulceration—did not encompass the complete clinical picture. The case included prominent mental characteristics such as anxiety, marked restlessness, hyperactivity, distractibility and easy anger, together with specific physical characteristics including recurrent painful oral ulceration, burning after eating or drinking, epigastric burning, bloating, flatulence and a previous tendency to constipation.

The repertorial analysis provided with the case demonstrated a prominent representation of **Arsenicum album**, supporting its selection as the constitutional remedy. The acute gastric symptom complex was managed with **Carbo vegetabilis** according to the treatment record.

An important feature of the follow-up was that improvement was not limited to a single symptom. The documented response included improvement of oral ulceration, burning, gastritis, bloating, fullness, appetite and bowel function.

The patient also adopted dietary and lifestyle modifications during treatment, including avoidance of junk, spicy and oily foods, increased water intake, walking and deep-breathing exercises. Therefore, the observed clinical improvement occurred in the context of both the prescribed treatment and concurrent lifestyle changes.

Individualisation of the Case

The individualisation can be represented as:

Table 11: Individualisation of the Case

Level	Case expression
Disease	Gastritis with recurrent oral ulceration
Particulars	Tongue and inner cheek ulcers; burning and pain
Gastric particulars	Epigastric burning, bloating, flatulence
Food relationship	Burning after eating/drinking
Mental generals	Anxiety, restlessness, hyperactivity
Behavioural characteristics	Easily angered, shouting
Intellectual characteristics	Intelligent but easily distracted
Personality	Reserved
General characteristics	Desire for sweets, non-vegetarian preference
Constitutional assessment	Arsenicum album
Acute symptom assessment	Carbo vegetabilis

This illustrates how the prescription was based on the **combination of characteristic mental, physical and particular symptoms**, rather than the disease label alone.

Before-and-After Clinical Picture

Table 12: Before-and-After Clinical Picture

Before treatment	After treatment
Recurrent oral ulcers	Oral ulcers completely cleared
3–4 ulcers at a time	No significant recurrence
Painful ulcers	Pain absent
Burning after eating/drinking	Burning absent
Gastritis	Markedly improved
Epigastric burning	Absent
Bloating	Absent
Fullness	Absent
Flatulence	No significant complaint
Occasional constipation	No constipation
Appetite reduced due to fear of ulcers	Appetite improved
Parents worried about health	Patient and family reassured/happy
Junk/spicy/oily food intake	Avoiding these foods
Limited lifestyle focus	Walking, deep breathing and better diet

Conclusion

This case of a **14-year-old girl with recurrent oral ulceration associated with gastritis** demonstrated progressive clinical improvement following an individualized homoeopathic approach.

The constitutional assessment identified **Arsenicum album** based on the recorded mental and general characteristics, while **Carbo vegetabilis** was used for the acute gastric symptom complex.

The documented follow-up showed substantial improvement in the overall clinical picture, including **complete clearance of oral ulcers, disappearance of oral burning, resolution of epigastric burning, bloating and fullness, improvement in appetite and normalization of bowel complaints**.

The case also highlights the importance of documenting the patient's **mental generals, physical generals, characteristic particulars, dietary factors, lifestyle and longitudinal response** rather than recording only the diagnostic label.

At the latest documented follow-up, the patient was reported to be completely well, with the oral ulcers cleared and the major gastric complaints resolved.

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