

Retroperitoneal Spindle Cell Sarcoma Unresponsive to Conventional Approach, Managed with Individualized Homeopathy: A Case Report

Shahin Mahmud¹, Seema Mahesh^{2,3*} and George Vithoulkas^{3,4}

¹Shaheen's Clinic, Tangail, Bangladesh

²Centre for Classical Homeopathy, Bengaluru, India

³International Academy of Classical Homeopathy, Alonissos, Greece

⁴University of the Aegean, Mytilene, Greece

Corresponding Author*

Seema Mahesh

Centre for Classical Homeopathy, Bengaluru, India

International Academy of Classical Homeopathy, Alonissos, Greece

E-mail: bhatseema@hotmail.com

Copyright: ©2024 Mahesh S. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received: 29-May-2024, Manuscript No. OCCRS-24-146831; **Editor assigned:** 09-June-2024, PreQC No: OCCRS-24-146831(PQ); **Reviewed:** 12-July-2024, QC No. OCCRS-24-146831(Q); **Revised:** 15-July-2024, Manuscript No. OCCRS-24-146831(R); **Published:** 31-Aug-2024, DOI: 10.35248/2332-2594.24.10(3).001-006

Abstract

Introduction: The retroperitoneal spindle cell sarcoma is a rare type of soft tissue cancer. The only available treatment option is surgical resection followed by chemo radiation. As complementary and alternative medicine becomes more widely used in cancer treatment, individualized homeopathy may provide an alternative to invasive interventions and economic burden associated with them.

Case report: A 41-years-old man who had been diagnosed with spindle cell sarcoma, on a progressive course despite conventional chemotherapy, benefited with individualized classical homeopathic treatment. The homeopathic remedies Lachesis in 200C and Lycopodium clavatum in 200C and 1M potencies were prescribed depending on the overall physical and psychological symptomatology picture as required. Within 7 months of starting the treatment, the tumour disappeared and the related symptomatology and quality of life improved, which remained so in the 4-years-long follow up period.

Conclusions: Classical homeopathy may be explored as a non-invasive and economically viable treatment for retroperitoneal spindle cell sarcoma. Further scientific studies are required to establish its efficacy.

Keywords: Spindle cell sarcoma • Homeopathy • Quality of life • Soft tissue sarcoma • Complementary therapies

Introduction

Primary Spindle Cell Sarcoma (SCS) is a rare type of connective tissue tumour, that can originate from the connective tissue around organs, between muscles, and beneath the skin [1]. The retroperitoneum is the second most common site for primary malignant soft tissue tumors, [2]. With mesenchymal lesions in this region being more likely to be malignant. Few cases of undifferentiated soft tissue SCS are available in the medical literature [3]. Most SCSs have an enigmatic aetiology but have been linked

to radiation exposure in certain cases [4,5]. Symptoms of SCS arise from gastrointestinal, urinary, or vascular impairment [2]. Perioperative radiation therapy has gained attention for its efficacy in addition to surgery for retroperitoneal sarcoma. In 2010, three new medications for treating soft tissue sarcoma were approved after phase III trials, but surgery remains the mainstay of treatment currently [6,7].

We report the case of a 41-years-old male, who was diagnosed with SCS and managed with individualized classical homeopathy. There are no other comparable cases where retroperitoneal SCS was managed with homeopathy in the published literature to the best of the authors' knowledge. The objective of this case report is to present and discuss a metastatic and advanced case of retroperitoneal SCS managed with an unconventional treatment method.

Case Presentation

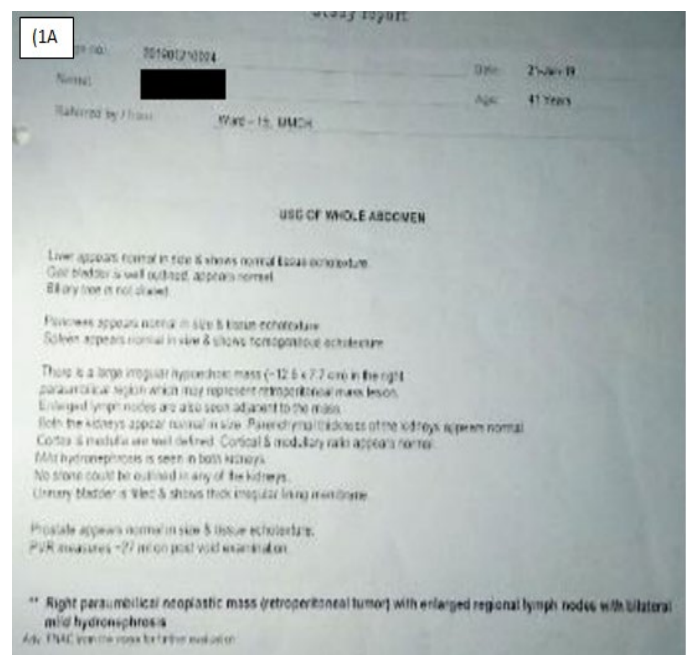
A 41-years-old Bengali male presented to homeopathic consultation on 2nd June 2019, with the diagnosis of retroperitoneal spindle cell sarcoma.

History of presenting complaints

Since December 2018, the patient suffered recurrent pain in the abdomen with hardness accompanied by great prostration, anorexia, nausea and low-grade fever of 99°F-100°F. A rapid emaciation ensued.

The examining physician advised ultrasonogram of abdomen on 21 January 2021, along with routine tests like complete blood count, urine routine and microscopy, and serum electrolytes (Figure 1).

The scan showed a right paraumbilical neoplastic mass (retroperitoneal tumour) with enlarged regional lymph nodes, with bilateral mild hydronephrosis.



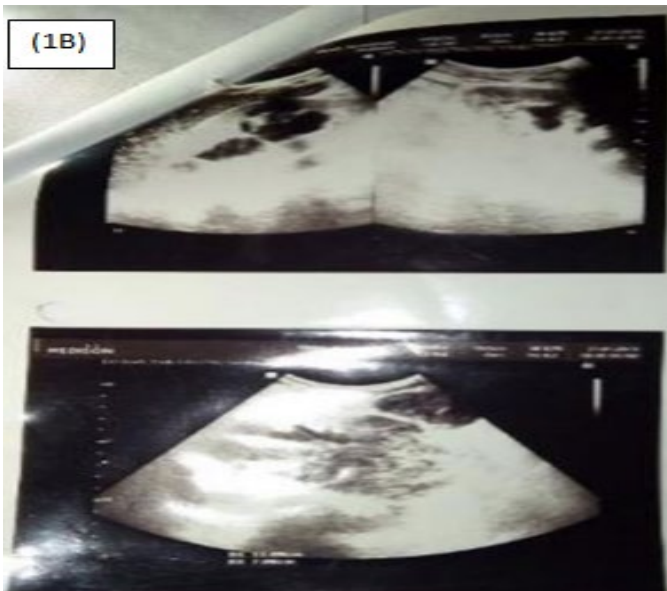


Figure 1. 1A) Ultrasound scan abdomen dated 21/01/2019, 1B) Findings: Right paraumbilical neoplastic mass (retroperitoneal tumour) with enlarged regional lymph nodes with bilateral mild hydronephrosis.

On finding the mass, they proceeded to perform CT guided Fine Needle Aspiration Cytology (FNAC) which showed the following microscopic features:

Smears prepared from the aspirate are moderately cellular containing many moderately differentiated atypical spindly cells in clusters and singles in a background of red blood corpuscles. Significant findings present. Findings consistent with atypical spindle cell tumour (Figure 2).

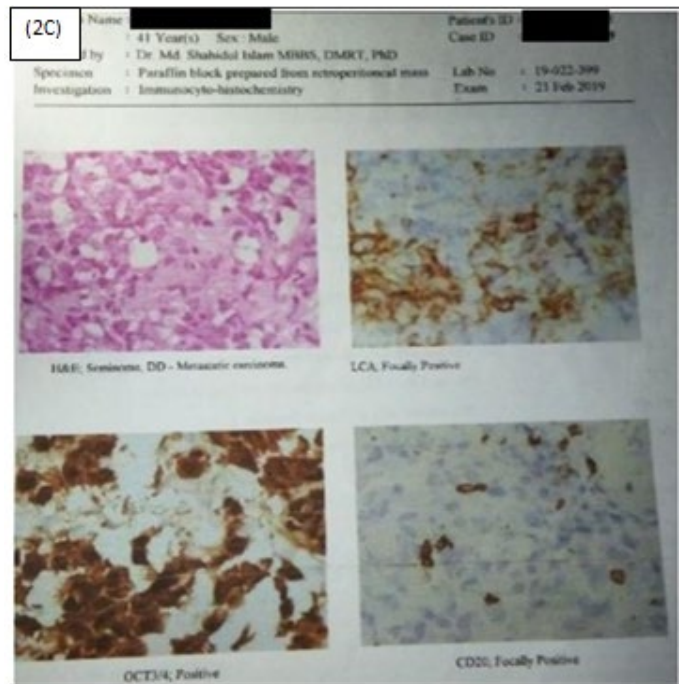
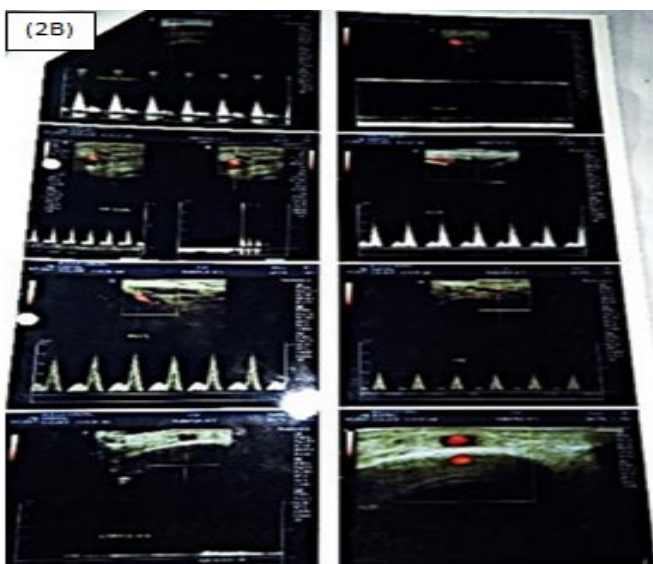
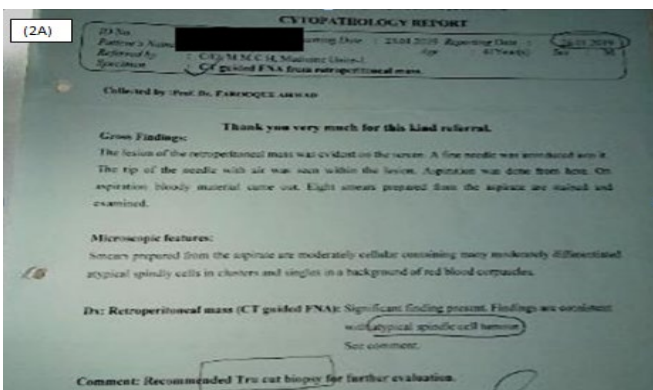


Figure 2. 2A) CT guided FNAC dated 21/01/2019; 2B) Microscopic features: Smears prepared from the aspirate are moderately cellular containing many moderately differentiated atypical spindly cells in clusters and singles in a background of red blood corpuscles significant findings present. 2C) Findings consistent with atypical spindle cell tumour.

Diagnosis

Spindle cell sarcoma (ICD10: C48.0) [8].

Conventional therapy before homeopathy

The treating physician did not see a point in surgery as there was already metastasis and advised chemotherapy instead. Chemotherapy included Bleocin 15 mg, Etoposid 166 mg, and Cisplatin 50 mg.

During the course of treatment from January to June 2019, the patient was also given Fusid plus, Furotil 500 mg, Anadol SR 100 mg, Maxpro 20 mg, Platinex 50 mg, Topoxin 100 mg, Bleonix 15 mg, Naurif, Roxadex, Ranitid, Esloric 100 mg, Cossec 20 mg, Rivotril 0.5 mg, Motigut 10 mg, V-plex, Ulcar 150 mg, Alagin 50 mg, Turbocef 500 mg, ACE 500 mg as and when required.

They had used 5% Dexoride 1000 ml, Saloride 500 ml for hydration and electrolytes imbalance management.

Despite conventional therapy, he deteriorated gradually, and after 4 cycles of chemotherapy, patient drastically deteriorated in his general health condition with severe side-effects including complete anorexia, inability to move due to prostration, sudden emaciation, was even unable to speak properly, without any apparent improvement or reduction in the sarcomatous growth.

Ultrasound on 5th March 2019 showed extensively large growth of sarcoma measuring 12 cm × 9 cm occupying mid-epigastric and lumbar region, along with hydronephrosis in both kidneys, and bilateral obstructive uropathy and cystitis.

Hepato-splenomegaly was noted by another CT scan on 23rd April 2019 along with invasion of the lumbar vertebrae by the lesion, causing fragmentation and anterior collapsing of L3 vertebra (Figure 3).

At this point, being doubtful about the recovery, the physician allowed the patient to return home. Then, the patient resorted to homeopathy, and stopped all his previous medications and therapies.

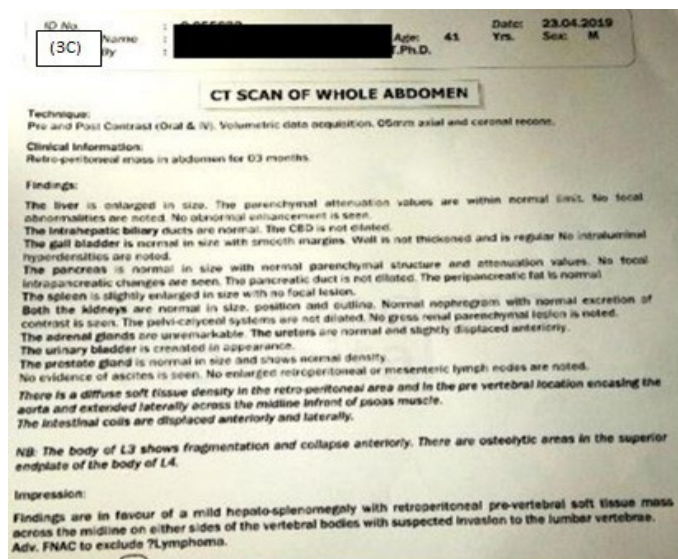
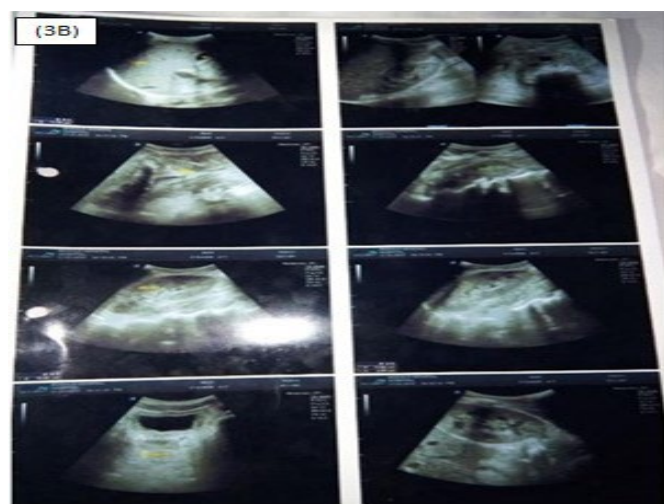
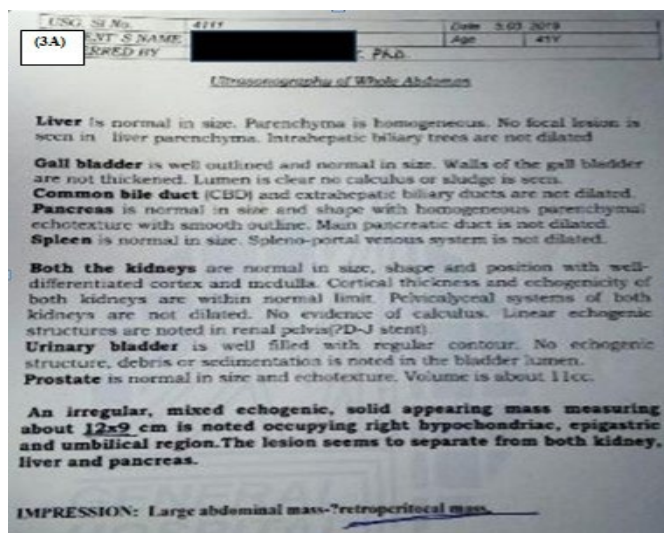


Figure 3. 3A) and 3B) Ultrasound scan (5/3/2019). 3C) CT scan (23/4/2019) of abdomen during conventional treatment (chemotherapy). Findings: The tumour persisted through the treatment and invasion of lumbar vertebrae by the tumour.

Past medical history

The patient had skin eruptions (unidentified) and gastrointestinal disturbances in childhood.

Family medical history

The patient's father had dyspnoea, urinary complaints, rheumatic affections and benign lipomatous tumours. His mother had rheumatism, and his brother had a history of rheumatic fever. His older sister had asthma.

Differential diagnosis

It can be challenging to distinguish benign lesions from SCS. This differential diagnosis can be resolved based on the pathological investigations and clinical findings [9]. In this case, CT scan, USG of the abdomen, and histopathology confirmed the diagnosis.

Homeopathic consultation

The patient was bedridden for 5 months since the initial diagnosis was made. At the time of the homeopathic consultation, he had severe neurological, gastrointestinal, urinary, and glandular complaints, including constant fever, tingling in the entire body, urinary obstruction/excessive urination, severe lower back pain, extreme sensation of being cold, black discoloration of both legs, distressing cough, general swelling with pedal oedema, and swelling and hardness of inguinal glands. He was also anaemic and was transfused 1 unit of whole blood, every month for the past 3 months. He was too weak to describe his complaints in detail and was assisted by his relatives in this.

The patient sought homeopathic consultation on 2nd June 2019. Investigation into his stresses revealed that he had suffered repeated events causing grief in the past. He was under severe financial stress for the last 20 years and was grief-ridden from family discord and deprivation of his ancestral property. He felt jealousy and indignation towards his brothers who had deprived him of his inheritance.

Classical homeopathy takes into account mental, emotional, and physical causes along with the manifestations of the disease [10]. The remedy that fits this integral picture is then selected.

Prescription on 2nd June 2019

Lachesis 200CH, twice a day for 10 days.

Three pills were diluted in 4 ounces of water through a homeopathic process called succession. One teaspoon of this solution constituted one dose for the patient. Initially, the patient was instructed to take the dose twice a day. It was advised to reduce the frequency to once a day if the patient experienced noticeable relief. Additionally, the patient had to shake the remedy bottle 10 times before taking the remedy each time. The first prescription was based on the psychological suffering of jealousy and a tendency for loquaciousness confirmed by patient's relatives as well as some of the prominent keynote of the remedy, such as aggravation during and after sleep, and intolerance of tight clothing [11].

Follow up and outcome

The detailed follow up of the case is given in table 1.

A CT scan of the abdomen on January 9, 2020, showed that the retroperitoneal mass had resolved, with no signs of metastatic lesions (Figure 4). Though the resolution occurred within 7 months of starting homeopathy, a long follow-up of 4 years, is provided to ensure stability of the condition. During this period, the patient's symptoms resolved, his weakness improved, and his quality of life was elevated (Table 1).

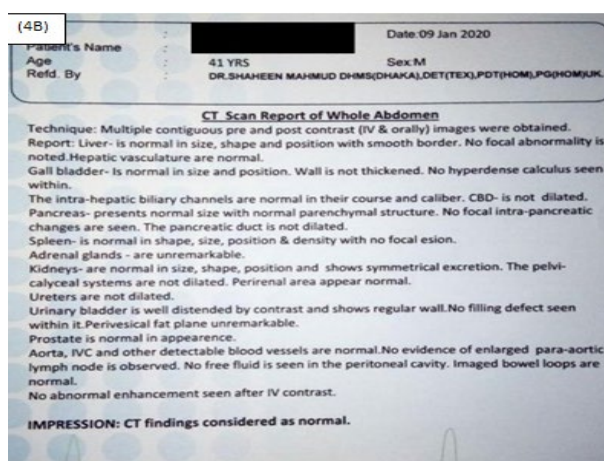
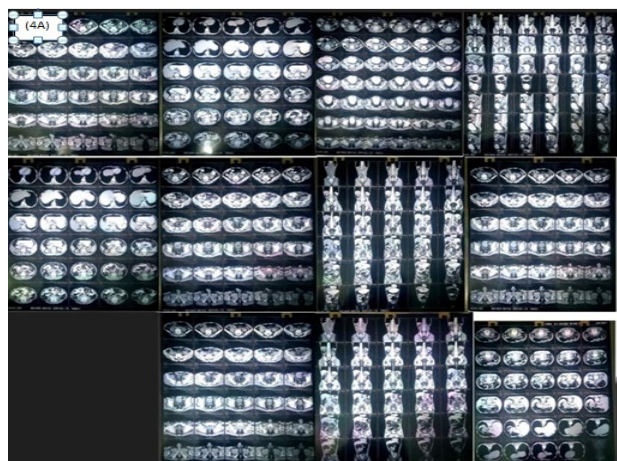


Figure 4. 4A) CT abdomen dated 9/1/2020; 4B) Findings: Normal CT scan.

Table 1. Follow up of patient through homeopathic treatment.

| Date | Symptoms | Prescription |
|------------|--|--|
| 12-06-2019 | Fever reduced considerably. Dyspnoea decreased in intensity and frequency. Tingling sensation decreased. Right-sided chest pain was absent. Abdominal distention was better, and he could tolerate milk better. Back pain had increased. | Continue succussed doses of Lachesis – 200C /twice a day for 10 days |
| 14-07-2019 | Lumbago improved and he was able to walk alone; Dyspnoea and fever subsided, but cold sensitivity and chilliness lingered. Occasional chills in the afternoon. No teeth Recent physical symptoms included tingling from hands to elbow, reappearance of tingling in the body. A pressing pain in lumbar region with tightness, cramping, and stitching in the legs (more in the left leg), dry mouth, lack of thirst, Body ache at night. Glandular swelling and pain in the left breast grinding. | Lycopodium clavatum – 200C/ once a day in water for 1 month, 4 succussions of remedy bottle every time before taking |
| 14-08-2019 | Patient was better generally. Hard swelling and stitching pain in the thighs, pain in a small spot on the spine, and swelling of lower limbs. The pain and swelling in the breast had disappeared. | Wait |
| 24-09-2019 | The patient developed an acute for the first time after many years. He had a cold with dysphagia, ameliorated from warm drinks, aggravated from empty Swallowing. There was profuse expectoration that tasted sweetish. He was less thirsty and had severe Chilliness. | Hepar sulphur – 30C/ 4 to 6 hourly |
| 02-10-2019 | The previous episode of acute resolved after Hepar sulphur, but now a bout of high fever occurred. The temperature was 103°F. Fever aggravated at afternoon. There was thick yellowish, sweetish expectoration. There was also headache, and cough, with nausea. His lumbar region hurt while coughing. | Wait |
| 21-10-2019 | Fever resolved within 2 days. Patient further improved in all symptoms and was generally well at that time, the patient was able perform his daily work. Even, the strength of the lumbar region had improved significantly, evident on clinical examination. Lumbago had reduced as well. | Wait |
| 07-01-2020 | Lumbago was less than before. But the pain in his legs was the same. According to the observation of his brother, the patient was more comfortable walking. Patient again experienced distension after eating which aggravated by lying on the left. The ankle pain and lumbago were more on the left. He also had left-sided temporomandibular joint pain. He had developed a desire for cold drinks. He couldn't tolerate tight clothing around the neck and was less sensitive to cold than before. | Lachesis – 200C/ once a day in water for 1 month, 4 succussions of remedy-bottle every-time before taking |
| 22-01-2020 | CT scan of the whole abdomen showed that the retroperitoneal sarcoma with all of its metastasis and organ-related complexities and co-morbidities was resolved. CT findings considered as normal. | Wait |
| 29-02-2020 | Pain in left hand as if it were broken. He experienced polyuria and sleeplessness at night and had been feeling chillier again. An old headache (probably from sinusitis) which had been suppressed by medications then, reappeared. | Lycopodium clavatum – 1M/ one dose every 3 rd day in water for 1 month, 6 succussions of remedy bottle every time before taking |
| 06-07-2020 | The patient was well. He had an acute cold with a fever. Restlessness. He changed his position frequently to get some relief from his pain. | Rhus toxicodendron – 200/ 4-6 hourly in water, 6 succussions of remedy-bottle every-time before taking |
| 30-03-2024 | After the previous follow up session, the patient continued to consult for acutes, and other minor health issues and his tumour resolution and general improvement have stayed consistent over this follow up period. | Homeopathic Prescription as and when needed for minor health issues and acutes |

Discussion

Initially, the patient was bedridden due to his advanced pathology and metastatic complications in other vital organs. The prognosis was unfavourable through conventional treatment as patient was deteriorating.

With homeopathy, Lachesis, and later Lycopodium, helped over a six-month period, resulting in improvement of clinical symptomatology and resolution of the pathology as evidenced by the CT scan of the abdomen. An aggravation of some of the patient's symptoms occurred during the initial part of the treatment, an expected, positive prognostic phenomenon during homeopathic treatment [10]. This resolved, followed by remarkable improvement in his health. Homeopathic treatment expects certain changes as evidence of improvement, which this case demonstrates. With improvement in the main pathology, frequent acute episodes with fever began showing up, which conforms to 'The continuum of a unified theory of diseases' propounded by Prof. George Vithoulkas and the research studies by Mahesh *et al.* [12-14]. According to this, his previously compromised immunity now had the power to mount acute inflammatory response to common infective agents. The reappearance of some of his previous symptoms, which were suppressed by other treatments, before the onset of the malignant disease, also conforms to Hering's law of cure in Homeopathy [15].

Following the loss of his ancestor's estates and a financial strain of many years, the patient became sick, which confirms the earlier research findings that prolonged stress can be carcinogenic [16]. A strong link between important life events, psychological stress, and the development of cancer has been established [17,18]. The recognition that cancer is not solely a physical disease but also influences a person's psychology, lifestyle, and general health, highlights the necessity for an integrated approach to cancer treatment.

The Modified Naranjo Criteria for Assessing Casual Attribution of Clinical Outcome to Homeopathic Intervention (MONARCH) score was 12/13, indicating that the benefit was most probably from the therapy (Table 2). Auto resolution of SCS has not been recorded thus far, indicating that such a development in this case is unlikely.

The limitation, in this case is the poor quality of the initial images as the patient only had pictures on his phone and had lost the hard copies. Bangladesh's sociopolitical and economic situation restricts the availability of high-end resources for digital preservation of such records and the authors reproduced them as well as were possible. However, in a developing country such as Bangladesh, with high quality medical care being difficult to approach, alternative medicine systems play a big role in providing help to the needful. This case demonstrates such an alternative.

Table 2. Modified Naranjo criteria for assessing casual attribution of clinical outcome to homeopathic intervention.

| Sr. No. | Criteria | Y | N | Not Sure/N A | Case |
|---------|---|---|----|--------------|------|
| 1 | Was there an improvement in the main symptoms or condition for which the homeopathic medicine was prescribed? | 2 | -1 | 0 | 1 |
| 2 | Did the clinical improvement occur within a plausible time frame relative to the drug intake? | 1 | -2 | 0 | 1 |
| 3 | Was there an initial aggravation of symptoms? | 1 | 0 | 0 | 1 |
| 4 | Did the effect encompass more than the main symptoms or condition? | 2 | -1 | 0 | 2 |
| 5 | Did overall well-being improve? | 2 | -1 | 0 | 2 |
| 6.A | Direction of cure: Did some | 1 | 0 | 0 | 1 |

| | | | | | |
|-----|--|----|----|---|----|
| | of the symptoms improve in the opposite order from the development of the disease? | | | | |
| 6.B | Direction of cure: Did at least two of the following aspects apply to the order of improvement: From organs of more importance to those of less importance? From deeper to more superficial aspects of the individual? From top downwards? | 1 | 0 | 0 | 1 |
| 7 | Did old symptoms reappear temporarily during the course of improvement? | 1 | 0 | 0 | 1 |
| 8 | Are there alternate causes that—with a high probability—could have caused the improvement? (Consider: known course of disease, other forms of treatment, other clinically relevant information) | -3 | 1 | 0 | 1 |
| 9 | Was the health improvement confirmed by any objective evidence? | 2 | 0 | 0 | 1 |
| 10 | Did repeat dosing, if conducted, create similar clinical improvement? | 0 | 0 | 1 | 0 |
| | | 10 | -4 | 1 | 12 |

Conclusion

This case of metastatic retroperitoneal spindle cell sarcoma on a progressive course, where conventional medicine had little effect, was benefited with individualized classical homeopathy. The 41-years-old Bengali male underwent radiological investigations before and after the treatment showing resolution of the tumour within 7 months of starting the therapy and remained cancer free and generally well over the 4-years follow up period. Further scientific studies are necessary to determine the relevance of classical individualized homeopathy in such pathologies.

Acknowledgements

The authors acknowledge the co-operation of the patient and his attendants in bringing this case report to light.

Informed Consent statement

ShM treated the patient, collected the data, drafted the manuscript, and did the referencing. SM reviewed the case report, edited the references, and edited the manuscript. GV is the supervisor and guarantor of the work.

References

- Jo, Vickie Y., & Christopher D.M. F. "WHO classification of soft tissue tumours: an update based on the 2013 (4th) edition." *Pathol J RCPA* 46.2 (2014): 95-104.
- Van Roggen, J. F. G., & Hogendoorn, P. C.W. "Soft tissue tumours of the retroperitoneum." *Sarcoma* 4.1-2 (2000): 17-26.
- Doyle, L. A. "Sarcoma classification: an update based on the 2013 World Health Organization Classification of Tumors of Soft Tissue and Bone." *Cancer* 120.12 (2014): 1763-1774.
- Khan, M., et al. "Radiation-induced spindle cell sarcoma: A rare case report." *Indian J Dent Res.* 20.3 (2009): 380-384.
- Schmitz, E., & Nessim, C. "Retroperitoneal sarcoma care in 2021." *Cancers* 14.5 (2022): 1293.
- Sassa, N. "Retroperitoneal tumors: Review of diagnosis and management." *Int J Urol.* 27.12 (2020): 1058-1070.

7. Hua, Hao. et al. "Retroperitoneal spindle cell tumor: a case report." *Front Surg.* 8 (2021): 764901.
8. World Health Organization. "ICD-10 version: 2016 [Internet]." World Health Organization (2019).
9. Lewis, J. S. "Spindle cell lesions—neoplastic or non-neoplastic? spindle cell carcinoma and other atypical spindle cell lesions of the head and neck." *Head Neck Pathol.* 2 (2008): 103-110.
10. Jain, N. "Organon of Medicine." *B Jain Publ.* (2004).
11. Kent, J. T. "Lectures on homoeopathic philosophy." *B. Jain publ.* 2003.
12. Vithoukias, G., & Carlino, S. "The "continuum" of a unified theory of diseases." *Med Sci Monit* 16.2 (2010): 15.
13. Mahesh, S., et al. "Association between Acute and Chronic Inflammatory States: A Case-Control Study." *Homeopathy* (2024).
14. Mahesh, S., et al. "Appearance of acute inflammatory state indicates improvement in atopic dermatitis cases under classical homeopathic treatment: a case series." *Clin Med Insights: Case Rep.* 14 (2021): 1179547621994103.
15. Kent, J.T. "Lecture 2. The Highest Ideal of Cure. In: Lectures on Homeopathic Philosophy." 2nd ed. Chicago, Illinois: 1919. 27–34.
16. Dai, S., et al. "Chronic stress promotes cancer development." *Front Oncol.* 10 (2020): 1492.
17. Falcinelli, M., et al. "The role of psychologic stress in cancer initiation: Clinical relevance and potential molecular mechanisms." *Cancer Res.* 81.20 (2021): 5131-5140.
18. Vithoukias, G. "Levels of health." *Int Acad Class Homeopathy*, 2017.

Cite this article: Mahesh S., Retroperitoneal Spindle Cell Sarcoma Unresponsive to Conventional Approach, Managed with Individualized Homeopathy: A Case Report. *Oncol Cancer Case Rep.* 2024, 10(3), 001-006.