

# A Patient with a Swollen Tongue

R.T. Clément, M.D.



She came to my medical office early in the morning. Her tongue was so swollen that she could hardly say 'good morning,' and she was very concerned about it.

She was not taking any medication, nor was she a drug user. I knew her as a very intelligent and well-balanced patient, conscious of the need for lifestyle management and aware of the importance of natural products. She could not recall any trauma or injuries to her tongue. A cursory exam revealed a swollen tongue while the rest of her body was normal. She was not in a critical situation, as she could still swallow and breathe normally. The condition impaired her diction.

## Homeopathic treatment

In homeopathy, the physical condition (in this case a swollen tongue) is treated with a substance which can produce a similar symptom. That substance is administered in a diluted form, which is prepared according to homeopathic methodology. According to the theories of homeopathy and hormesis, the homeopathic medicine will trigger the biological elimination process.<sup>1</sup>

J.T. Kent, the well known homeopathic physician, lists 79 single remedies for swollen tongue.<sup>2</sup> A remedy may be selected based on local symptoms such as swelling of the tongue on one side (Apis, Calcarea, Bismuth, Silicea) or swelling of the tip of the tongue (Phosphorus, Natrum muriaticum).

Classical homeopathy usually requires at least an hour to "repertorize" the case, i.e., to gather a great deal of information. Since a single remedy should not be prescribed on a single symptom, a minimum of three symptoms are required.

*Apis mellifica* (the honey bee) is indi-

cated for the treatment of a swollen tongue which is made worse from touch and is intolerant to heat.<sup>3</sup>

The patient who needs *Mercurius corrosivus* feels worse in the evening, has pain in the pharynx, and feels chilly.<sup>4</sup>

The patient who needs *Vespa crabro* (live wasp) has burning pain and feels dizzy.<sup>5</sup>

The patient who needs *Lachesis* (bushmaster snake venom) has a swollen tongue with aphthae and denuded spots, with burning and rawness.<sup>6</sup> The gums are swollen and bleed. This condition is frequently associated with sore throat, and all symptoms are worse after sleeping.

The patient who needs *Diphtherinum* (the potentized inactivated diphtheric virus) has a swollen tongue with symptoms of infection, along with offensive breath and oral discharge.<sup>7</sup>

My patient was not prepared to endure the discomfort of a long conversation and I was not ready to jeopardize my patient schedule, so I gave her *Apis-Homaccord*<sup>®</sup>, a complex homeopathic medication consisting of different remedies, including *Apis*. She responded well and called me in the afternoon, feeling relieved.

The following day she was back, mumbling "Dotter Cleman, I cannot speak, my tongue iz swaullen." As a good homeopath I could have questioned my prescription but I am sorry to say (to those followers of Hahnemann) that I used the rationale of homotoxicology to look after this case.

## The Homotoxicologic vision

What were the "toxins" which might have created the swollen tongue? Food comes to mind, first of all. In order to identify a food allergy, I established a diet

of mainly rice for a couple of days. She came back, slimmer, but still with a swollen tongue. The *Apis-Homaccord*<sup>®</sup> was providing some relief but the condition kept recurring, mainly in the morning upon waking and at night before going to bed.

The next step I chose was consultation with a biological dentist. While my exam did not reveal any broken dental fillings or new dental work, I referred her to a dentist for an evaluation. She came back with his report stating that he saw no abscess and that he could make no direct link with any dental material or condition.

## The Allopathic vision

The next step I could have taken might have been to start her on corticosteroids or immuno-suppressants, or possibly, as a good medical doctor who could not find a solution, refer her to a surgeon for a glossectomy<sup>8</sup> or a laser reduction of the tongue.<sup>9</sup> However, one thing we have forgotten in medicine is to keep things simple. Very often the physician is only the catalyst which assists the patient in discovering the problem.

The next time I saw her she told me, "Dauctor, I know wouat I am allergic to. I am alleurgic to my toozpaste."

It should have been obvious. Although she had been responding to the homeopathic medication, her condition recurred in the morning and the evening after she brushed her teeth. She was using a natural toothpaste which contained propolis.

Propolis is a multifunctional material used by bees in the construction and maintenance of their hives. It may have antibiotic, antifungal, antiviral, and antitumor properties.<sup>10, 11, 12</sup> Propolis contains a variety of ingredients with sensitizing proper-

ties, such as caffeinic acid and cinnamic acid and may also include pollen and dead insects. It has been associated with allergic contact dermatitis.<sup>13,14</sup>

#### Observation

The frustration of patients and physicians facing a lack of response to a medication, whether allopathic or homeopathic, should force us to consider the theory of Homotoxicology as a strategy in patient care. The overuse of medications and surgical procedures is often due to a lack of patience and sharpness in the initial diagnostic. The clinical search for the etiology of a medical condition is a priority. In the present case, a meticulous journey through the patient's day could have assisted me in realizing that even natural toothpaste in a patient with a healthy lifestyle could also be the cause of the allergy. In this case, the lack of response to Apis was due to repeated exposure to the allergen. The non-response of a patient to a medication does not always require a change of medication or a search for a new modality. Sometimes it reminds us to use a resource which cannot be replaced by any medication; knowl-

edge, which we gain from education and experience.

#### References

1. Cazin JC, Cazin M, Gaborit JL, Chaoui A, Boiron J, Belon P, Cherrault Y, Papapanayotou C. A study of the effect of decimal and centesimal dilutions of arsenic on the retention and mobilization of arsenic in the rat. *Human Toxicol.* (1987) 6:315-20.
2. Kent JT. *Repertory of Homeopathic Materia Medica*. Sixth American Edition: 421.
3. Boericke W. *Materia Medica with Repertory*. Ninth Edition. 1927: 50-51.
4. Boericke W. *ibid*:350.
5. Boericke W. *ibid*:540.
6. Boericke W. *ibid*:312.
7. Boericke W. *ibid*:207.
8. Straith RE, Ritter G. Partial resection of the tongue for the amelioration of obstructive sleep apnea: a report on 34 cases with long-term follow-up. *J Craniomaxillofac Surg.* (1997 Dec) 25 (6):305-09.
9. England C, van der Zypen E, Fankhauser F, Fankhsauser S, Schmoker R. Morphological changes elicited in skeletal muscle by a Nd:YAG laser scalpel and electrocautery during surgical reduction of the human tongue. *Anat Anz.* (1997 Jun) 179 (3):245-54.
10. Burdock GA. Review of the biological properties and toxicity of bee propolis (propolis). *Food Chem Toxicol.* (1998 Apr) 36 (4):347-63.
11. Steinberg D, Kaline G, Gedalia I. Antibacterial effect of propolis and honey on oral bacteria. *Am J Dent.* (1996 Dec) 9 (6):236-39.
12. Ghaly MF, Ezzac SM, Sarhan MM. Use of propolis and ultragriseofulvin to inhibit aflatoxigenic fungi. *Folia Microbiol.* (1998) 43 (2):156-60.
13. Thomas P, Korting HC. Propolis-induced allergic contact dermatitis mimicking pemphigus vulgaris. *Arch Dermatol.* (1998 Apr) 134:511-13.
14. Silvani S, Spettoli E, Stacul F, Tosti A. Contact dermatitis in psoriasis due to propolis. *Contact Dermatitis.* (1997 Jul) 37 (1):48-49.