

Homeopathic treatment of perianal fistula in a dog - Case Report

Tratamento homeopático da fístula perianal num cão - Relato de caso

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ABSTRACT

Perineal fistulas are frequently diagnosed in dogs in clinical practice. They are characterized by an inflammatory lesion in the perianal region or adjacent tissues, causing pain and discomfort to patients. In many cases, fistulas can be ulcerated. In general, corticosteroids and immunosuppressants are the treatment of choice for perianal fistulas. However, they cause various side effects. Surgical intervention is also an option, but sequelae may occur, such as fecal incontinence, the most frequent of them. From this perspective, it is evident that conventional treatments do not provide the complete restoration of the patients' health. On the other hand, homeopathic treatments are gaining space in the veterinary clinical routine with successful results for various diseases that affect animals. This study aimed to report the case of a German Spitz male dog diagnosed with perianal fistula exclusively treated by homeopathy. The prescription of medicines was based on the law of similars, and the medicines *Arnica montana*, *Belladonna*, *Hamamelis virginiana*, and *Nitric acidum* were chosen. The therapeutic protocol established restored the affected tissues' function with a complete resolution of the disease in 15 days. No complications were recorded.

Key-words: Complementary treatment, homeopathy, perianal fistula

RESUMO

As fístulas perineais são frequentemente diagnosticadas em cães na prática clínica. São caracterizadas por uma lesão inflamatória na região perianal ou tecidos adjacentes, causando dor e desconforto aos pacientes. Em muitos casos, as fístulas podem ser ulceradas. Em geral, corticosteróides e imunossupressores são o tratamento de eleição para as fístulas perianais. No entanto, causam vários efeitos secundários. A intervenção cirúrgica é também uma opção, mas podem ocorrer sequelas, como a incontinência fecal, a mais frequente delas. Nesta perspectiva, é evidente que os tratamentos convencionais não proporcionam a restauração completa da saúde dos pacientes. Por outro lado, os tratamentos homeopáticos estão a ganhar espaço na rotina clínica veterinária com resultados bem sucedidos para várias doenças que afectam os animais. Este estudo visava relatar o caso de um cão alemão Spitz macho diagnosticado com fístula perianal tratada

exclusivamente por homeopatia. A prescrição de medicamentos foi baseada na lei dos similares, tendo sido escolhidos os medicamentos *Arnica montana*, *Belladonna*, *Hamamelis virginiana*, e *Nitric acidum*. O protocolo terapêutico estabelecido restabeleceu a função dos tecidos afectados com uma resolução completa da doença em 15 dias. Não foram registadas complicações.

Palavras-chave: Tratamento complementar, homeopatia, fístula perianal

1 INTRODUCTION

Homeopathy is a unique treatment system that has been gaining significant interest among physicians and veterinarians worldwide (Raj et al., 2020) simply because alternatives to conventional therapies are needed when the latter is no longer a treatment option (Valle et al., 2020a). Homeopathy comprises a treatment system in which minimal amounts of the active ingredient of animal, mineral, or vegetable origin are diluted and potentiated in series and administered to the sick patient. However, this same active ingredient may cause clinical signs similar to those of the disease to be treated when given in ponderal doses to healthy organisms (Mathie et al., 2017).

Homeopathic medicines have been indicated to treat various diseases in animals, such as cancer (Valle et al., 2018, 2019, 2020a; Valle and Carvalho, 2021a); canine atopic dermatitis (Hill et al., 2009); otodematoma (Valle and Carvalho, 2020, 2021b; Valle et al., 2015, 2020b); canine babesiosis (Chaudhuri and Varshney, 2007); idiopathic epilepsy in dogs (Varshney, 2007); bovine mastitis (Klocke et al., 2010); endometritis in dairy cows (Enbergs and Sensen, 2007); diarrhea in newborn piglets (Camerlink et al., 2010); bovine papillomatosis (Shakoor et al., 2012); canine oral papillomatosis (Lopes et al., 2018); and anal fistula in dogs (Valle and Carvalho, 2021c).

Within this context, treatment alternatives are sought for various diseases, such as perianal fistulas, which cause high discomfort to patients and frequent recurrences. This disease is often diagnosed in the clinic of small animals, but its etiology is unknown. It is a chronic and progressive disease characterized by single or multiple ulcerative lesions in the perianal tissue (Pieper and McKay, 2011).

The diagnosis for perianal fistula is clinically performed by anamnesis, complete physical examination, and observing signs and symptoms. Bacterial infections are often associated with this condition. Perianal fistulas may be debilitating and have a negative impact on the quality of life of dogs and their tutors (Cain, 2019).

Dogs affected by anal fistulas usually show excessive licking of the anus and perianal region as a clinical sign. This region is sore when the tail is raised, or the area around the anus is touched. Other signs may include edema, local hyperemia, and, in the latter stage, ulceration (Pieper and McKay, 2011). In most dogs, physical examination of the anal region shows draining wounds and matted fur along with a fetid odor and moist skin inflammation. The extent and depth of each fistula may vary. Excessive effort or discomfort often occurs when evacuating, and fresh blood can be seen in the feces (Ellison, 1995; Ruaux, 2011).

The conventional treatment uses medications such as antibiotics, immunosuppressants, corticosteroids, and non-steroidal anti-inflammatory drugs. However, they generally play a minimal role in disease regression, as supported by the literature. Hence, surgery is usually the only option for complete disease resolution (Budsberg et al., 1985; Drager et al., 1998). Some sequelae may occur due to the surgical procedure, such as fecal incontinence, especially if there are severe and/or extensive primary lesions. Post-treatment follow-up is recommended during the first 4-6 weeks of clinical-surgical therapy since these patients need additional tests to monitor the medication side effects (Cain, 2011; Ellison, 1995; Pieper and McKay, 2011). The prognosis is dependent on the disease severity degree (Budsberg et al., 1985; Drager et al., 1998). Fistulas may heal but return days or months later. For this reason, this disease is characterized as being difficult to control since a high recurrence rate is observed (Misseghers et al., 2000).

Therefore, the development of treatments as an alternative to conventional therapy becomes extremely important for treating perianal fistula. This article aimed to report the case of a male dog diagnosed with perianal fistula, treated by oral and injectable homeopathic therapy.

2 CASE DETAILS

An 8-year-old German Spitz dog, male, neutered, and weighing 4.3 Kg, was seen at NaturalPet Clinic, Brasilia, Brazil. The animal was fed on commercial pet food and homemade food. The main complaint was dragging the anus on the floor, leaving a trail of blood on it. On physical examination, the patient was in good general condition, normal colored mucosa, TPC 2", heart and respiratory rate within normal limits for age and species, slightly overweight, adequate hydration conditions, active, alert, aggressive, biting with no warning, agitated, and anxious. No abdominal discomfort was observed,

and the temperature was 38.5 °C. The anal region was swollen on the left ventral part of the anus, hyperemic, and ulcerated. The animal had acute pain on palpation. A perianal fistula was then characterized (Figure I). Blood was collected for laboratory tests of complete blood count and biochemical measurements of alanine aminotransferase (ALT), alkaline phosphatase (AP), urea, and creatinine. The treatment was instituted by homeopathic therapy. Initially, Belladonna 30CH (1×10^{-60}) (Injectcenter®) and Hamamelis virginiana D15 (1×10^{-15}) (Injectcenter®) were immediately given to the patient, intravenously and in the same syringe, for immediate relief. Nitric acidum 30CH (1×10^{-60}), alcohol 10%, three drops, twice a day, for 30 days, was orally prescribed. The following medicines were prescribed subcutaneously, once a day, three times a week, for two weeks: Belladonna 30CH (1×10^{-60}) (Injectcenter®), one ampoule (1.1mL); Arsenicum album D9 (1×10^{-9}) (Injectcenter®), one ampoule (1.1mL); and Hamamelis virginiana D18 (1×10^{-18}) (Injectcenter®), one ampoule (1.1mL).

Fig. 1. Edema in the left perianal region, ventrally to the anus, associated with an ulcerated perianal fistula.



2.1 RESULTS AND DISCUSSION

Perianal fistula is frequently diagnosed in dogs in clinical practice. In conventional treatments recommended for this disease, allopathic medication plays a minimal role, leaving clinicians with surgical intervention as the only supposedly efficient option for disease resolution. Thus, a complementary treatment plan that provides a smooth healing process should be recommended to treat the present clinical signs complex and prevent future recurrences (Dutta, 2019; Valle and Carvalho, 2021a). Since sequelae caused by the treatments of choice are responsible for numerous changes in the animals' lives, this article proposed an alternative therapy to anal/perianal fistula that would not cause side effects and would be effective in its purpose.

The treated patient showed clinical improvement right after the first application of the medication, which reduced the pain stimulus and local bleeding. Blood tests resulted in a complete blood count: red blood cells: 8,130,000/L; hemoglobin: 17.1 g/dL;

hematocrit: 53.8%; MCV: 66.17 fL; MCHC: 31.78 g/dL; leukocytes: 6,300/L; eosinophils: 630/L; lymphocytes: 1,701/L; platelets: 308,000/L; total plasma protein: 7.0 g/dL; ALT: 46 U/L; creatinine: 0.90 mg/dL; AP: 69 U/L; urea: 20 mg/dL. The patient returned to the clinic every two days for medicine application. Good healing was observed over the days (Fig. 2), and the complete resolution was recorded 15 days after treatment initiation.

Follow-up evaluations were carried out every two to three days until lesion healing. The patient was also followed up for six months after the initial occurrence, and no complications were registered during this period. The patient returned to the clinic 15 days after treatment initiation, and no inflammation was observed in the anal region. The lesion was in its final resolution period, but there was no swelling or pain due to local palpation (Fig. 2C). At the end of 17 days, the animal returned to the clinic with no symptoms, and the process was entirely resolved.

Fig. 2. Healing process of perianal fistula as a response to homeopathic treatment. (A) Inflammatory process showing improvement in the perilesional edema associated with fistula healing five days after treatment initiation. (B) Resolution of the initial inflammatory process with no perilesional edema, eight days after treatment initiation. (C) Complete healing of the initial lesion, with no associated edema or inflammation, 15 days after treatment initiation.



According to Hahnemann *apud* Rebollo (2008), homeopathy uses the body's natural tendency to rebalance vital energy and organic functions. Therefore, homeopathic therapy has been gaining space in various medical and veterinary prescriptions in order to favor a smooth healing process to the diseased organism, providing significant improvements in the treatment of various diseases, minimizing the need for invasive and costly procedures (Jayagopala, 1992). The homeopathic medicines used for treating the reported patient were chosen as per the law of anatomopathological similarity. *Arsenicum album* is a highly toxic mineral that, in homeopathic preparations, is indicated in cases of anxiety, agitation, perianal excoriations, violent pain, among others. *Belladonna* is a plant originally from Europe, recommended in lesions in which active congestion with inflammation and acute, sudden, and violent pain are observed. *Nitric acidum* is chosen in cases of chronic inflammation and irritation of the mucous membranes, mainly at the

level of the body's orifices, depicting sharp pains, lesions with a tendency to ulceration, and hemorrhages. It is a widely prescribed medication for varicose ulcers, anal fissures, among others. *Hamamelis virginiana* is a plant originally from North America and contains a large amount of tannin in its structure. It is indicated in cases of bleeding of venous origin, especially post-traumatic, and to treat phlebitis, varicose ulcers, and traumatic inflammations on the skin (Cairo, 1991; Vannier and Poirier, 1987).

Our findings are corroborated by Valle and Carvalho (2021c), who reported the treatment of an anal fistula using oral and injectable homeopathic therapy in a dog of the French bulldog breed. Similar to our data, the authors recorded the excellent outcome of the homeopathic therapy administration, with no recurrences over 18 months. This information is a promising result to which the present study may add some enlightenment so that this treatment be more frequently indicated due to the excellent results in both cases.

Our results are also corroborated by Dutta (2019), who described the treatment of anal fistula following strict homeopathic principles and follow-up at appropriate intervals for about four months. The author described gradually marked improvement with the medicine *Calcarea phosphorica* 200CH (1×10^{-400}) after completing the therapy period. He recorded excellent results, with no need for more invasive treatments.

The treatment of perianal fistulas is complex due to various side effects triggered by conventional drugs prescribed in clinical therapy, besides possible sequelae caused by surgical procedures (Pieper and McKay, 2011; Cain, 2011). Additionally, sequelae may significantly impact the animal's quality of life and indirectly affect their tutors (Valle and Carvalho, 2021c).

The homeopathic protocol used in this study is of interest to treat patients diagnosed with anal and perianal fistulas mainly due to its smooth resolution process. Additionally, it is not a high-cost therapy, no side effects or sequelae due to the treatment were documented, and treatment time was reduced using this therapy.

3 CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

4 CONCLUSION

Homeopathy, when well applied, is an excellent treatment option, free of side effects, easy to administer, of low cost, and able to promote smooth healing of the organism. Constant and favorable evolution of the patient's condition, free of complications, was verified during the entire treatment process, which occurred in three weeks. However, despite the positive results obtained in this report, we suggest further comparative and randomized studies to better understand the efficacy of such therapy.

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