

Review of: "Sujok Triorigin Therapy For Chalazion: Case Reports"

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Potential competing interests: No potential competing interests to declare.

Originality and Relevance

The study investigates an alternative therapy method for chalazion, which is of interest given the commonality of the condition and the pursuit of non-surgical treatment options by many patients. The use of Sujok Triorigin therapy is relatively novel in the scientific literature concerning chalazion management, offering a fresh perspective on potential treatment methods.

Methodology

The methodology involves a non-contact approach through social media to guide patients in applying color therapy based on Triorigin principles. While innovative, this method raises concerns regarding the precision of self-applied treatment and the lack of direct clinical assessment. The absence of a control group and reliance on patient-reported outcomes without objective measures (e.g., clinical examination, imaging) limits the study's rigor. Future research could benefit from a more structured approach, including baseline and follow-up assessments by healthcare professionals.

Outcome/Results

The reported outcomes of deflation in chalazion size within 3-4 days are promising. However, without objective measurements or comparison to a control group receiving standard care, it's challenging to attribute improvements solely to the Triorigin therapy. The results would be strengthened by including more cases and possibly integrating objective metrics such as chalazion size reduction verified by medical examination.

Discussion

The discussion offers an insightful explanation of the Triorigin model and its application to chalazion. However, it would benefit from a more critical comparison with existing treatments, discussing potential mechanisms of action, limitations, and the role of Triorigin therapy within the broader spectrum of chalazion management. Additionally, addressing potential placebo effects and the psychological impact of patient involvement in self-treatment could provide a more nuanced understanding of the results.

Limitations

The manuscript acknowledges the absence of histopathological examination and medical report data, which is a

significant limitation. Future studies should aim to incorporate these aspects to verify diagnoses and evaluate treatment effects comprehensively. Discussing the limitations more thoroughly, including the small sample size and the lack of long-term follow-up, would provide readers with a clearer understanding of the study's scope and the generalizability of its findings.

Conclusion

The conclusion that Sujok Triorigin Therapy can treat chalazion is intriguing but preliminary. Emphasizing the need for further research, possibly with a randomized controlled trial design, would be beneficial for substantiating the therapy's effectiveness and exploring its potential place in clinical practice.

Overall Assessment

This manuscript contributes an innovative perspective to the field of alternative therapies for chalazion. While the preliminary findings are encouraging, the study's design limitations necessitate cautious interpretation. Future research with more rigorous methodologies, larger sample sizes, and objective outcome measures is essential to validate the effectiveness of Sujok Triorigin Therapy for chalazion and understand its mechanism of action.

Recommendations

- Enhance the study design with a control group and objective outcome measures.
- Expand the sample size for greater statistical power and generalizability.
- Include follow-up assessments to evaluate the long-term efficacy and safety of the treatment.
- Conduct histopathological examinations where possible to confirm the diagnosis and rule out other conditions.
- Explore the psychological impact and potential placebo effect of self-administered therapy.

This manuscript makes a valuable contribution to the exploration of alternative therapies for chalazion, setting the stage for further research in this area.