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**Sayasri SM**

PG Scholar, Department of  
Repertory, Sarada Krishna  
Homoeopathic Medical College  
& Hospital, Kulasekharam,  
Kanyakumari, Tamil Nadu,  
India

**AS Suman Sankar**

Professor, Department of  
Repertory, Sarada Krishna  
Homoeopathic Medical College  
& Hospital, Kulasekharam,  
Kanyakumari, Tamil Nadu,  
India

## A case report of atopic dermatitis with anti-nuclear antibody positive

**Sayasri SM and AS Suman Sankar**

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### Abstract

**Introduction:** Atopic dermatitis, is a long-lasting inflammatory skin condition noted by itchy, red and scaly skin lesions usually occurring on the flexible areas of the body. The prevalence reported ranged from 3.1% to 7.21% in the paediatric population up to 16 years age. In India, the overall prevalence rate was 4.4%, though overall it was 14.2%. Patients with Atopic Dermatitis exhibit a greater prevalence of Anti-Nucleated Antibodies.

**Aim and Objectives:** To show the evidence-based case report of Atopic Dermatitis with Anti-nucleated Antibodies positive.

To study the effectiveness of homoeopathic medicine in atopic dermatitis with anti-nucleated antibodies with an evidence-based case report.

**Methodology:** A single case report of atopic dermatitis with anti-nuclear antibody positivity. A 9-year-old female child has been present with blackish-brown discoloration and itching on her posterior surface of both knee joints, anterior surface of both elbow joints, and lips for 6 months. Also, a patient was reported to have anti-nucleated antibodies. After case-taking and repertorization Graphites 0/1 was administered. It was prescribed in LM potency along with advice on diet and regimen. Within a duration of 12 months, the patient was completely cured of her sufferings, and she was treated with individualised homeopathic medicine between August 15 2022 to August 18 2023. During the follow-up visits, treatment outcomes, were assessed and in the meantime, anti-nucleated antibodies became negative.

**Result:** This study found that the homoeopathic medicine Graphites 0/1 was effective in the treatment of Atopic dermatitis with Anti-nuclear Antibody for a duration of 12 months.

**Conclusion:** It can be concluded that individualized homoeopathic medicine is effective in treating Atopic Dermatitis with Anti-Nucleated Antibodies. Today, the prevalence of Atopic Dermatitis with Anti-Nucleated Antibodies is higher among Children and adults. Further inherited diseases have been reduced. Homoeopathy medicines are affordable without adverse effects. Graphites was prescribed as an individualized medicine for this case with LM potency, which results in Atopic dermatitis with Anti-nucleated Antibodies completely with evidence from Clinical and Laboratory report.

**Keywords:** Atopic dermatitis, anti-nucleated antibodies, graphites, homoeopathic medicine

### Introduction

Atopic dermatitis, is a long-lasting inflammatory skin condition noted by itchy, red and scaly skin lesions usually occurring on the flexible areas of the body. The prevalence reported ranged from 3.1% to 7.21% in the paediatric population up to 16 years age <sup>[1]</sup>. In India, the overall prevalence rate was 4.4%, though overall it was 14.2% <sup>[2]</sup>. The condition is known to have a hereditary component, and it is more common in affected families. The usual form and spread of the rash in a patient with a personal or family history of asthma and/or hay fever are among the criteria that allow a doctor to identify it. The term atopic comes from the Greek word atopic, which means "abnormal." The term dermatitis refers to skin inflammation. When referring to this ailment, many doctors and patients use the term eczema. It's also known as neurodermatitis <sup>[3]</sup>.

### Materials and Methods

**Case presentation:** Patient was a 9 years of female child in my clinic come with the complaints of skin patches especially in the posterior surface of both knee joints, anterior surface of both elbow joints, and lips for 6 months. Itching skin in posterior surface of both knee joints and anterior surface of both elbow joints. Itching skin aggravates while perspiration especially while playing and by gluten content food items (Biscuits). Took allopathic treatment but much relief didn't occur, only temporary amelioration in itching occurs.

**Corresponding Author:**

**Sayasri SM**

PG Scholar, Department of  
Repertory, Sarada Krishna  
Homoeopathic Medical College  
& Hospital, Kulasekharam,  
Kanyakumari, Tamil Nadu,  
India

After stoppage of medicine, she suffered from sever itching. So, patient stops the allopathic treatment and willing to take homoeopathic treatment.

Mother had an history of Rheumatic arthritis during her first pregnancy (Patient's Intra Uterine Life). At that time patient's mother took homoeopathic medication she got relieved from rheumatic arthritis. Paternal grandmother had an history of eczema. Physical generals of the patient are normal and good. She has a desire to bread, egg, chocolates. Patient is mentally active with changing of mood constantly. Very much irritable and restlessness. Patient had aversion to fanning and desires covering.

The systemic examination of the patient reveals that skin of the patient with blackish-brown patches over the posterior surface of both knee joints, anterior surface of both elbow joints and left lips corner. Characteristic of lesion is blackish-brown, dry. There was no any signs of discharges, blood spots, everted border and thickened skin.

### Homoeopathic intervention

The patient was treated and follows up with systemic manner by homoeopathic medicines that have been shown in the table (follow up). The medicines were selected








according to the present totality of symptoms. The periodic follow up were done through frequent intervals.

**Table 1:** Symptoms evaluation and totality based on presenting complaints

Mental	Physical	Particular
Mood changes constantly	Desires bread, egg, chocolates	Blackish-brown discoloration patches over the posterior surface of both knee joints, anterior surface of both elbow joints and left lip corner
Very much irritable	Desires covering	Itching of skin < perspiration and by gluten content food items (Biscuits)
Restlessness	Aversion fanning	

**Table 2:** Rearranging totality for the final selected remedy

S. No.	Repertorial totality	Repertorial totality
1.	Mind-Restlessness, nervousness	Graphites 6/3
	Sitting, while: At work, while	Arsenicum album 4/2
2.	Mind-Weeping, tearful mood, etc.	Carbo veg 4/2
	Alternating with: Irritability, laughter	Mang 4/2
	At trifles	Plb 3/1
3.	Skin-Discoloration: Blackish	Sec 3/1
4.	Skin-Eruptions: Patches	Apis 2/1
5.	Skin-Itching: Perspiration agg:	Arg-n 2/1

Symptoms:	<div>5</div>	Remedies:	<div>36</div>	Show Repertorisation Tools				Prescribe	Remedy List	Record	Replace	View All	More Results		
Remedy Name				Graph	Ars	Carb-v	Mang	Plb	Sec	Apis	Arg-n	Calc	Crot-h	Iris	Kali-bi
Totally				6	4	4	4	3	3	2	2	2	2	2	2
Symptoms Covered				3	2	2	2	1	1	1	1	1	1	1	1
Kingdom															
[Kent] [Mind] Restlessness, nervousness: Sitting, while: At work, while...				3											
[Kent] [Mind] Weeping, tearful mood, etc.: Alternating with: Irritability...				1											
[Kent] [Skin] Discoloration: Blackish: (17)					3	2		3	3	2	2		2		
[Kent] [Skin] Eruptions: Patches: (19)				2	1	2	1					2		2	2
[Kent] [Skin] Itching: Perspiration agg: (3)							3								

**Fig 1:** Repertorisation chart

### Results and Discussion

The patient of 9 years of female child with blackish-brown discoloration and patches and itching on her posterior surface of both knee joints, anterior surface of both elbow joints, and lips. The provisional diagnosis is Atopic Dermatitis. And patient was tested ANA positive on 15/07/22. The patient was treated with homoeopathic medicines orally for one year. The figure of before and after eruption of the patient is show in figure 2.

Homoeopathy has a lot of medicines for treating the Atopic Dermatitis, after repertorisation medicines include Graphites, Arsenicum album, Carbo-veg, Mang, Plb, Sec, Apis, etc are come under the repertorisation result as shown in the table 2. From these similar remedies we should take the similimum for curing the case. So here by considering this the patient was treated with GRAPHITES 0/1 in 4 doses as weekly once for 1 month. It was repeated in one dose at 3

months interval in 6 months she felt better after 6 months even after exposure to certain food items and playing. And she was in observation for one year. Then on 18/07/23 she was tested ANA negative.

### Selection of potency & doses

I choose LM Potency in this case because the selection of the similimum alone is not sufficient for a cure. The next step is choosing the exact potency and timely application of the dose. The potency and the dose also should be similar to the case. Here the individuality of the case decides the suitable remedy, potency and dose. New dynamization method diminished this period to "one half, one quarter and even still less, not that much more rapid cure might be obtained" aph:246. Frequent repetition is permissible for even long-lasting remedies it can be repeated if and when necessary. Aph: 246FN<sup>[4]</sup>.

<b>Customer Information</b> Bill No : 2300104975 Name : Mr. [REDACTED] Age & Sex : 9Y / Female DOB : 19/11/2012 2/39 NADAR STREET, VALAPADY (TK) SALEM		<b>Physician Information</b> Ref. by Dr.: SAI SHREE [QR CODE]		<b>Sample Information</b> Printed Date : 15/07/2022 17:25 Sample Date : 14/07/2022 08:23 Sample Collected at : Salem3	
<b>Spec.type</b> <b>Test Name</b> <b>Results</b> <b>Previous Results (Date)</b> <b>units</b> <b>Reference Ranges</b> <b>Verified by</b> <b>Verified date</b> <b>verified time</b> <b>Test QRCode</b>		<b>IMMUNOLOGY</b>			
SERUM	ANTI NUCLEAR ANTIBODY (IF method)	POSITIVE (++) Nucleoplasm fine granular & + Nucleoli Pattern)	METHOD:INDIRECT IMMUNOFLUORESCENCE (1 in 100 dilution)		Dr.U.Devaki   15/07/2022   17:04 [QR CODE]

**WHITECH**  
DIAGNOSTIC CENTRE  
The Home Test Lab

**METROPOLIS**  
The Pathology Specialist

Patient : P0249920 (10/F)  
SID.No. : 013897  
Branch : THIRUNELVELI  
Referrer : DHAKSHAN CLINICAL LABORATORY  
15/80, THIANGA DURAI NADAR COMPLEX, ARUMUGANERI - 628  
202  
Ph : 6379480722

SID Date : 17/07/2023  
Reg Time : 18:35:45  
Report Date : 18/07/2023  
Report Time : 18:05:00  
Page Number : 1 / 1  
Re-print

Test Result Biological Reference Interval

Sample collected and sent

**BLOOD - IMMUNOLOGY**  
ANTI NUCLEAR AB (ANA/ ANF - BY  
Method : IFA

RESULT : Negative for ANA.  
Pattern: Weak Cytoplasm Granular  
Suspected Antibodies against Cytoplasmic Organelles -  
Ribosomes / Mitochondria / Lysosomes/ Signal  
Recognition particle(SRP).  
METHOD : Indirect Immunofluorescence using  
HEp2 cells and primate Liver sections

*Dr. Samudrala Bharathi*  
DR SAMUDRALA BHARATHI M.D.  
Chief Pathologist

\* End Of Report \*

\* Our Kilpank Lab Serves You Round The Clock \*

Fig 2: Before and after ANA blood report



Fig 3: Before and after

Table 3: Chart of medicines prescribed and regular follow-up

Date	Symptoms	Inference	Prescription
20.08.22	Itching reduced. Discolouration as been reduced.	Better	Rx 1. GRAPHITES 0/1-2 doses (sos) 2. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 3. B PILLS (No. 40) 3 x TDS
21.09.22	No Itching. Discolouration as been reduced.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
21.10.22	No Itching. Discolouration as been reduced.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
20.11.22	No Itching. No discolouration.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
23.12.22	Itching on & off. < after intake of	Better	Rx 1. GRAPHITES 0/1-1 doses

	bread. No discolouration.		(H.S) 2. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 3. B PILLS (No. 40) 3 x TDS
20.01.23	No Itching. No discolouration.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
21.02.23	No Itching. No discolouration.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
20.03.23	No Itching. No discolouration.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
22.04.23	Itching on & off Mild blackish brown discolouration seen in posterior aspect of left knee	Reappeared Better Reappeared	Rx 1. GRAPHITES 0/1-1 dose (H.S) 2. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 3. B PILLS (No. 40) 3 x TDS
21.05.23	Itching. Discolouration.	Better Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
22.06.23	No Itching. No discolouration.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS
24.07.23	No Itching. No discolouration.	Better	Rx 1. SAC LAC-4 Dose (H.S) (Weekly once) x 1 month 2. B PILLS (No. 40) 3 x TDS

### Conclusion

The management of atopic dermatitis, a chronic inflammatory skin condition characterized by itchy, red, and scaly lesions, requires a multifaceted approach. The case study presented demonstrates the effectiveness of homeopathic treatment in a 9-year-old patient with a family history of similar conditions. Over a year of treatment with homeopathic remedies such as Graphites, the patient showed significant improvement, with reduced itching and discoloration, and eventually tested ANA negative. This

highlights the potential benefits of individualized homeopathic interventions in managing atopic dermatitis, providing a promising alternative to conventional treatments, particularly for patients seeking long-term relief without the side effects of allopathic medicines.

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