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Homoeopathic management of herpes zoster: A case report

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Abstract
Herpes Zoster commonly known as Shingles, is a viral infection caused by the reactivation of Varicella Zoster virus, which is the same virus that causes chicken pox resulting in a painful rash and potentially severe complication. The symptoms include Painful rash, usually on one side of the body. Burning, tingling and numbness before the rash appears, redness and swelling, Blisters that crust over and heal, fever, headache and fatigue. Cause of HZ usually is reactivation of VZV previously present in the body, weakened immune system, stress or other medical conditions.

Keywords: Herpes Zoster (HZ), shingles, homoeopathy, skin disorder, neuralgia

Introduction
Herpes zoster, commonly known as shingles is a viral infection that affect the lot of people worldwide, it is caused by the varicella zoster virus, which is a same virus that causes chicken pox. It is characterized by painful rash and blisters that usually appears on one side if the body.

Case description
A 64 years female patient presented with severe neuralgic pain and small blisters in right side of the flank region. A detailed case taking was done and after Repertorisation and referring to material medica the similimum has been prescribed.

Epidemiology
Herpes zoster is 1 in 3 people in their lifetime. The incidences increases with age and most cases occurring in people over 50 years of age.

Risk factors
Age 50+ age.
Weakened immune system.
Certain medical conditions like diabetes, kidney diseases.
Previous history of chicken pox.

Transmission
Herpes zoster is not contagious in classical sense.
People with active shingles can spread the virus to others who have not had chickenpox or have not been vaccinated against it.

Symptoms
Painful rash, usually on one side of the body.
Burning, tingling or numbness before the rash appears.
Redness and swelling.
Blisters that crust over and heal.
Fever.
Headache.
Fatigue.

Mortality
Rarely fatal, but can lead to serious complications for example- postherpetic neuralgia, eye problems along with vision difficulty.

Case report
A female patient named Mrs XYZ, aged 64 years a housewife, residing at KarodhSquare, Bhopal, presented with painful burning blisters on the right side of flanks from 7 days. There is intense neuralgic pain radiating to back and abdomen. The complaint aggravated by touch or any motion. No particular amelioration marked.

History of present complaint
7 days ago there is a neuralgic pain in the right flank region, at that time the patient took pain killer (diclofenac) for that pain, 2 days after that some eruptions appears on the right side of the flank.
After the appearance of eruptions the pain get intensified and burning increased for more 3 days the patient was on modern medicine, the pain get subside for few hours and reappear again with increased intensity.

Family history
Father- Sudden death due to cardiac arrest.
Mother- Type 2 Diabetes Mellitus.
Husband -Huntingtons disease

Physical generals
Diet- Vegetarian
Appetite- adequate
Desire- Milk
Aversion- nothing Specific
Sleep- Sleeplessness because of pain
Dreams- Nothing Specific
Bowels- Clear
Micturition- 5-6 times a day
Thirst- 3-4 litres /day
Thermals- chilly

Vitals
Pulse- 88/bpm
Blood Pressure- 130/90mmhg
Respiratory Rate- 17/min
Temperature- 98.2degree farhanite

Mental generals
Very restless mentally
She said all the problems in her life came after she came to know about the tubectomy of her daughter in law.
Her daughter in law recently gave birth to 2nd girl child and planned for no more child by tubectomy and patient want atleast one male child in future but her son and daughter in law agreed for tubectomy without asking or even telling her.
When she was asked about her feeling she said “abjohona thaw o toh ho gya”
After the incident she feels anxiety in the house.
She thinks everyone is planning against her.

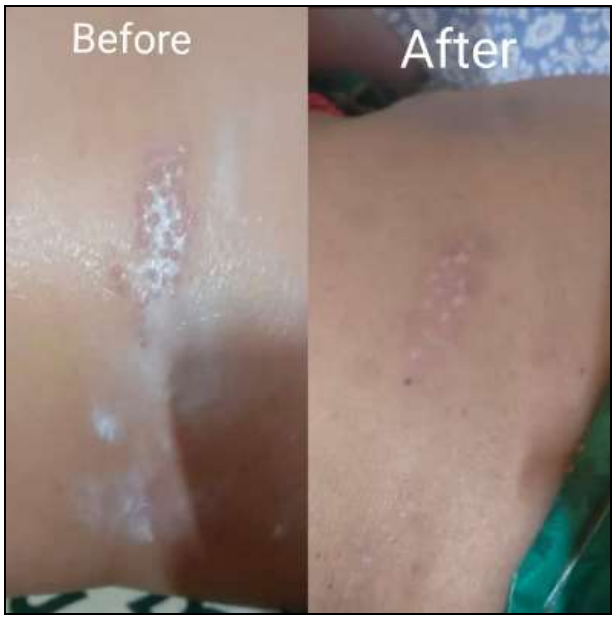
General examination
General condition- alert and stable
Pallor- not detected
Clubbing- not detected
Cynosis- not detected
Oedema- not detected
Lymph Nodes- not palpable
Teeth / gums- healthy
There is hyperaesthesia around eruptions.

Systemic examination
Per abdomen- Soft
S1 S2- Heard, no added sounds
Chest- Bilateral clear
CNS- Conscious and Oriented

Provisional diagnosis
- Herpes zoster viral infection

Differential diagnosis
- HSV 1
- HSV 2

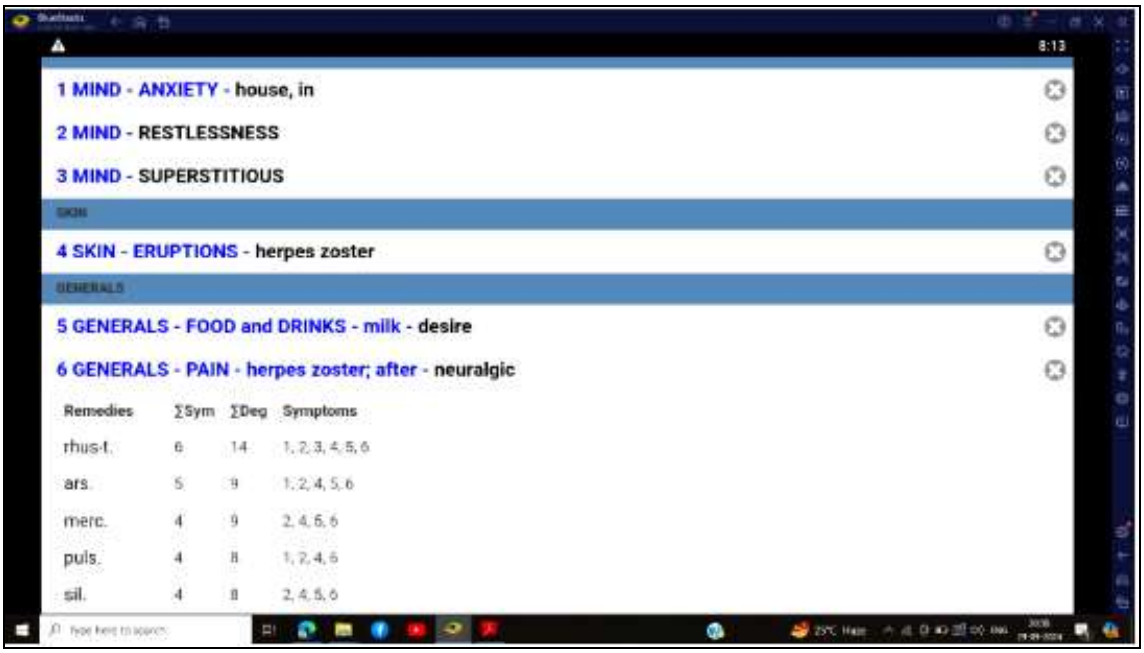
Impetigo and Folliculitis



On the basis of repertorisation and referring to material medica the prescription is
Rx
Rhus Toxicodendron 200) OD for 3 days
Sac lac 30) TDS for 7 days

1st follow up 12/01/2024
After taking the medicine there is slight increase in pain for 1 day and after that it decreases down and patient got relief by evening of 2nd day of medication.
But again, pain come back on 5th day with very low intensity.
Rx
Rhus Toxicodendron 1 M) 1 dose
Phytum 20) TDS for 7 days

2nd follow up 18/ 01/2024
There was no pain since last prescription eruptions completely better neuralgic pain absent, no new symptom appear.
Rx
Placebo 30) 1 dose
Sac lac 30) BD for 3 days.



Discussion

Homoeopathy is a holistic system of medicine and here the treatment plan is based on individualization through the detailed case taking. It is essential to find the similimum on the basis of totality of symptom. This case of herpes zoster treated with similimum medicine is an attempt to show the efficacy of homoeopathic approach in the treatment of herpes zoster. Improvement of the symptoms and the infection was assessed on the basis of follow ups given by the patient.

Conclusion

This case report provides valid evidence of the successful treatment of herpes zoster with the help of constitutional homoeopathic medicine and it also signifies the importance of holistic approach of treatment in homoeopathy. The importance of internal medication instead of external application had been demonstrated in this case.

Declaration of patient consent

Patient consent was taken for images to be reported for this article.

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