



International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493
P-ISSN: 2616-4485
www.homoeopathicjournal.com
IJHS 2025; 9(2): 904-906
Received: 11-04-2025
Accepted: 13-05-2025

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Facial warts and its homoeopathic management: A case report

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DOI: <https://www.doi.org/10.33545/26164485.2025.v9.i2.N.1603>

Abstract

Warts are benign epithelial growths caused by Human Papillomavirus (HPV) infection ^[1]. Conventional treatments often fail to prevent recurrence ^[1]. This case report highlights the successful homoeopathic management of recurrent facial warts in a 38-year-old male using *Thuja occidentalis* 1M ^[3]. The individualized prescription based on the patient's constitutional makeup and underlying sycotic miasm ^[4, 5] led to complete resolution without recurrence.

Keywords: Warts, HPV, homoeopathy, *thuja occidentalis* 1M, sycotic miasm

Introduction

Facial warts are benign epidermal proliferations resulting from infection with the human papillomavirus (HPV), primarily involving non-oncogenic types such as HPV-3, HPV-10, HPV-28, and HPV-41. These lesions commonly present as small, flesh-colored or hyperpigmented papules on the face, particularly around the perioral region, chin, eyelids, and beard area. Among the clinical variants, verruca plana (flat warts) and filiform warts are most frequently observed on facial skin. The transmission of HPV occurs through direct skin-to-skin contact or autoinoculation, often facilitated by minor trauma, shaving, or scratching. Facial warts are generally asymptomatic but may be of significant cosmetic concern, especially when located on exposed areas. Additionally, the Koebner phenomenon, characterized by the development of lesions at sites of trauma, may contribute to their spread ^[1].

Case report

Patient Information

Name: XYZ

Age/Sex: 38 years / Male

Occupation: Bank Manager

Date of Consultation: 24th April 2020

Chief Complaint

Recurrent filiform warts on the right side of the face (between chin and angle of mouth) for 9–10 months.

History of Presenting Complaint

The patient traced the onset of warts to a shaving injury sustained at a local salon. Initially, small, fluid-filled eruptions appeared, progressing within a month to cauliflower-like, irregular, pointed growths typical of filiform warts. There was no associated itching, pain, or burning, but severe bleeding occurred upon scratching or manipulation. Despite multiple consultations with allopathic dermatologists—prescribing Vitamin C, Zinc supplements, and topical salicylic acid—the condition persisted. Electrosurgery was performed twice which left behind a deep scar, and each intervention was followed by recurrence, particularly at sites of local anaesthetic injection. The recurrence pattern prompted the patient to seek Homoeopathic treatment.

Past Medical History

No significant systemic illness reported.

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Negative for immunodeficiency conditions.

Physical Generals

Constitution: Athletic; Weight: 89 kg; Height: 5'8"

Skin: Dry

Hair/Nails: Greying of hair; nails healthy

Appetite: Good

Cravings: Spicy food, salty food, raw vegetables

Aversion: Curd

Thirst: ~2 liters/day

Stool: Constipation, bloating post chicken

Urine: Normal

Sweat: Profuse on occiput and feet

Thermals: Chilly patient, prefers open air

Mental Generals

- Irritability; anger from contradiction
- Reserved, fast speaker, few friends
- Anxiety about family's future, especially son
- Apprehension about professional tasks
- Dreams of workplace failures, incomplete tasks
- Conscious about appearance; emotionally distressed by public reactions to facial warts

Life Space

The patient leads a disciplined, active lifestyle with regular physical exercise. He exhibits a strong sense of responsibility toward his family's wellbeing. His professional role requires public interaction, making the facial growths a source of significant emotional and psychological stress.

General and Systemic Examination

Pulse: 84 bpm

BP: 120/82 mmHg

RR: 14/min

Temperature: Afebrile

Systemic Examination: No abnormalities detected.

Differential Diagnosis

- Verruca vulgaris
- Seborrheic keratosis
- Molluscum contagiosum
- Skin tags

Miasmatic Background

The dominant miasm identified was sycotic, evidenced by:

- Proliferative growths
- Recurrence after suppression
- Cosmetic concerns aggravating mental symptoms
- Cauliflower-like, rapidly growing warts
- Bleeding upon injury or manipulation

Analysis of the Case

- Recurrent, cauliflower-like, soft warts on the right side of the face
- Bleeds profusely on scratching
- History of recurrence after suppression (electrosurgery)
- Irritability and anger from contradiction
- Anxiety about family's future
- Constipation with bloating post chicken
- Profuse sweat on occiput and feet
- Aversion to curd; craving spicy, salty food and raw vegetables
- Dreams of failure in professional life

Remedy Selection

Based on the synthesis of mental symptoms, physical generals, particulars, and miasmatic predominance, Thuja occidentalis 1M was selected.

Prescription

- Thuja occidentalis 1M, 4 pills, once daily for 5 days
- Rubrum 40, 4 pills, twice daily for 1 month
- Thuja Q (Local application), external, twice daily for 1 month

Auxiliary Management

- Avoid shaving trauma; use trimmer only
- No manual manipulation of warts
- Continue regular exercise to maintain immune function
- Stress management techniques (e.g., meditation, deep breathing)



Fig 1: Before treatment

First Follow-up (27/05/2020)

Observation

On examination, the previously fleshy, cauliflower-like pink growths appeared shriveled, darker in color, and were progressively drying. The surface showed no signs of moisture, bleeding, or shininess. The margins of the lesions, though still irregular, were notably flattened compared to the earlier hypertrophic appearance. Importantly, no signs of new vesicular eruptions or fresh crops of warts were observed in the surrounding area.



Fig 2: After treatment

Second Follow-up (27/05/2020)

Prescription**Rubrum 40:** 4 pills, twice daily x 30 days**Thuja Q:** Local application, twice daily x 1 month**Second follow-up 29/06/2020 (over phone)**

Patient said that the dried up skin came off. No bleeding nor any new crop of water filled boils.

Prescription**Rubrum 40:** 4 pills, twice daily x 30 days**Third follow up 23/08/2020****Observation**

The previously cauliflower-like, bleeding warts have completely resolved, leaving a smooth, flattened skin surface.

Final clinical image confirms restoration of healthy epithelium.

No evidence of new vesicular eruptions or warty outgrowths.

The patient reports improved emotional well-being and renewed self-confidence.



Fig 3: Final treatment

Third follow up 23/08/2020**Conclusion**

This case stands as a clear demonstration of true constitutional cure through homoeopathy. While conventional local excision methods provided only temporary relief with recurrence, homoeopathic treatment addressed the underlying sycotic miasm and constitutional imbalance, resulting in complete cessation of wart growth, spontaneous resolution of lesions, and no recurrence.

Thuja occidentalis, selected as the simillimum after proper individualization, acted deeply on the physical, emotional, mental, and miasmatic planes, confirming its curative potential. By eliminating the miasmatic root, *Thuja* not only resolved the existing pathology but also removed the inherent predisposition for recurrence.

In alignment with Hahnemann's teachings in *The Chronic Diseases*, this case reaffirms that anti-miasmatic treatment is essential for achieving permanent cure in chronic conditions.

Declaration

Patients consent was obtained for the use of clinical data and images in this report.

Conflict of Interest

Not available

Financial Support

Not available

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How to Cite This Article

Varsha Rajan and Safira Da Costa. Facial warts and its homoeopathic management: A case report. *International Journal of Homoeopathic Sciences*. 2025;9(2):904-906.

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