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A comprehensive review of the efficacy of homoeopathic remedies in the management of warts

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Abstract
Background: Warts are benign skin growths caused by the human papillomavirus (HPV). They are a common ailment, particularly in children and adolescents, with various types including common, plantar, and flat warts. Clinically the lesions are asymptomatic and manifest in different forms, have irregular verrucous surface and keep on growing slowly. The number of warts varies from single to several hundred. The homeopathic medicines shows effective results in treatment of warts. The homeopathic medicines like *Thuja occidentalis*, Causticum, *Calcarea carb*, *Calcarea calcinata*, *Natrum muriaticum*, Dulcamara, *Hepar sulph*, *Arsenicum album*, and even rare remedies like Carcinosin are considered as effective in treating warts.
Objective: To evaluate and compile clinical evidence regarding the efficacy of homoeopathic remedies in the treatment of warts based on existing literature and case reports.
Result: The review of these six studies evaluating homoeopathic management of warts, with remedies such as *Thuja occidentalis*, Causticum, Calcarea carb, Calcarea calcinata, Natrum muriaticum, Dulcamara, Hepar sulph, Arsenicum album, and even rare remedies like Carcinosin, shows a promising outcome.
Conclusion: Homoeopathy provides effective results against warts, As the homeopathy focus is on treating warts at the root cause–through strengthening the immune system and addressing the internal disturbance causing the warts. This holistic approach helps prevent recurrence and provides long-term relief without ugly scars or discoloration that may result from conventional treatments.

Keywords: Warts, homeopathy, Human papillomavirus (HPV), Thuja occidentalis, alternative medicine

Introduction
Wart is one of the common dermatological disorders caused by DNA viruses, which grow in the epidermis. The source of infection is other infected individuals and the disease is transmitted by direct or close contact. It has very low infectivity; a casual contact with an infected individual is unlikely to result in the disease [1]. Warts are categorized on the basis of location, namely, common warts (around nails and fingers), foot warts, and genital warts. They are also understood on the basis of their morphology and texture, namely, soft, hard, flat, smooth, rough, scaly, etc. These are contagious and can spread from direct skin contact [5].

Warts are of diagnostic value to us in distinguishing between different stages of disease. The verruca vulgaris is found in children who are suffering with hereditary sycosis; they appear at or about the second dentition. The verruca filiformis comes as a tertiary lesion in an acquired form of sycosis. The verruca plana juvenilis is another hereditary form found more or less upon the back of hands and faces of children and young people. They are usually pigmented, disseminated, and in irregular unilateral groups [6]. The individuals with depressed cell-mediated immunity due to treatment with immunosuppressive drugs, Hodgkins'disease, malignant lymphomas and lymphocytic leukaemia are more likely to have a large number of warts [1].

Pathophysiology
HPV is epitheliotropic and replication occurs in the differentiated squamous epithelium. Viral DNA can be detected in the lowest layer of the epithelium. While the protein coat can be found in the superficial layer.

HPV infection can give a picture of stratum spinosum cell hyperplasia (acanthosis) with the stratum corneum having one or two layers of parakeratotic cells. The dermal papillae are elongated and there are well-defined boundaries in the dermis. The presence of koilocytes cells, which are squamous cells that have large and mature sizes, have a clear perinuclear zone, which has expanded beyond the cell layer. The nucleus of the koilocyte cell is enlarged and hyperchromatic and sometimes doubles in appearance. These cells show a cytopathic effect caused by HPV. These cells are not sensitive to predict the presence of HPV infection in the cervix [2].

The pathogenesis of HPV begins with infection of stem cells in the basal layer of the epithelium. Once inside the cell, the virus requires expression of the E1 and E2 genes to maintain a low genome copy number. These proteins bind to the origin of replication and the virus secretes cellular DNA polymerases and other proteins required for DNA replication. In the suprabasal layer, the expression of genes E1, E2, E5, E6 and E7 contributes to the maintenance of the viral genome and induces cell proliferation, increasing the number of HPV-infected cells in the epithelium, resulting in a higher number of cells that will eventually produce infectious virions. In more differentiated cells of the same epithelial layer, promoter activation is dependent on differentiation and maintenance of E1, E2, E6 and E7 gene expression. Furthermore, there will be an activation of the expression of the E4 gene, which will promote the amplification of viral genome replication, greatly increasing the number of virus copies per cell, at the same time the expression of L1 and L2 genes occurs [3].

In the granular layer, the gene end products, major and minor proteins of the viral capsid, L1 and L2 respectively, from the viral capsid and virion formation, which reach the cornified layer of the epithelium and are released. HPV replication begins when host cell factors interact with the LCR region of the HPV genome and begin transcription of early viral genes, at E6 and E7. Viral gene products E6 and E7 deregulate the cell cycle, impairing cell growth regulatory pathways and modifying the cellular environment to facilitate the virus. Replication in cells occurs terminally. Infection with HR-HPV usually lasts from 12-18 months and can be cured depending on the immune system. However, about 10% of women fail to develop a cure for HPV infection, resulting in persistent infection [4].

Many studies classify HPV infection as persistent if HPV is detected in two consecutive follow-up visits, 4-6 months apart. The persistent nature of HPV infection and the integration of viral DNA into the cell genome contribute to an increased risk of high-grade and malignant lesions due to the resulting genomic instability. E6 and E7 can induce centrosomal abnormalities resulting in abnormal centrosome reduplication, leading to an abnormal number of centrosomes [2].

Review of literature

Md. Ismail Shaikh, Independent Research Scholar, has studied five cases demonstrating the effectiveness of homoeopathic treatment for warts using centesimal and fifty millesimal (LM) potencies. The study found that LM potencies acted faster, with cases resolving within 2-4 weeks, while centesimal potencies took longer. Medicines like *Thuja occidentalis* and Causticum were selected based on individualisation and miasmatic consideration. All patients showed complete resolution without recurrence during follow-ups ranging from six months to five years, and no adverse effects were reported. Although the study highlights promising results for LM potencies in treating warts safely and effectively, it is limited by its small sample size and lack of controls, indicating the need for larger, well-designed trials to validate these findings scientifically [7].

Dr. Sachin Bhalerao, Dr. Swanand Shukla, Dr. Khozem Lokhandwala, has studied The "Effectiveness of Homoeopathic Medicines in the treatment of Different types of Warts." Has explored 15 cases over six months at Smt. CMP Homoeopathic Medical College, Mumbai. It found that plane warts (40%) and common warts (33.33%) were the most prevalent types. The most frequently prescribed remedies were Calcarea carb (27%), Thuja (20%), and Natrum mur (20%). The study emphasises that homoeopathic treatment, based on individualisation and miasmatic understanding, was effective for different types of warts, with no mention of recurrence or adverse effects. Although limited by a small sample size and lack of controls, it highlights homoeopathy as a cost-effective, holistic approach for treating warts by addressing internal [8].

Dr. K. Keerthana1, Dr. Ambala Sriharitha has conducted, "A Randomised Single Blind Control Study to Explore Clinical Potential of Homoeopathic Remedy Calcarea Calcinata 30C in Management of Common Warts" assessed 30 patients with common warts, dividing them into two groups - one receiving Calcarea Calcinata 30C and the other a placebo, over six months. Results showed that 73.33% of patients in the treatment group were completely cured, with a statistically significant reduction in wart size ($p<0.0001$), while the placebo group showed minimal to no improvement. The study concluded that Calcarea Calcinata is an effective remedy for common warts with no adverse effects observed. However, despite its promising findings, the study was limited by a small sample size, lack of double blinding, and absence of long-term follow-up to assess recurrence, warranting larger controlled trials to validate its efficacy further [9].

Bikash Biswas *et al*, published an article presenting a clinical case series documenting the successful treatment of four different types of warts–filiform, verruca vulgaris, and cutaneous horny warts–using individualized homeopathic remedies. Each case was approached through detailed case-taking, repertorization using Kent's Repertory, and the prescription of a single remedy based on the principle of individualization. The selected remedies–Hepar sulphuris, Arsenicum album, and Natrum muriaticum–were administered in 200C potency and followed by placebo. All patients showed complete resolution of warts within 40-45 days without any adverse effects. The study emphasizes the holistic and individualized approach of homeopathy, highlighting the potential effectiveness of constitutional treatment in dermatological conditions [10].

Swami Shraddhamayananda, conducted a clinical study that evaluates the effectiveness of ultradiluted homeopathic remedies–Thuja occidentalis, Dulcamara, and Natrum muriaticum–in treating skin warts, primarily caused by the human papillomavirus (HPV). Conducted on 200 patients with a control group of 10, the research recorded a significant therapeutic response: 88% of patients showed remission within 1 month, with complete recovery by 3

months. The medicines were selected based on the type and location of warts. The study highlights: Thuja was used for keratotic, cauliflower-like warts. Natrum Mur. for palmar and plantar types. Dulcamara for other morphological forms [11]

K. Sivakumar and Mamatha Mohan, has published an article presenting a single case study of a 5-year-old girl with multiple cutaneous warts, successfully treated with Carcinosin 200C, a homoeopathic remedy. The patient had previously received Ayurvedic, allopathic, and homoeopathic treatments without relief. After detailed case-taking and repertorisation, a single dose of Carcinosin 200C was prescribed based on her constitutional symptoms and family history (notably, a relative with breast cancer). Over a two-month period, the warts gradually reduced and completely disappeared, with no recurrence reported in a multi-month follow-up. The MONARCH inventory was used to evaluate the causal link between the remedy and outcome, scoring +9, suggesting a strong positive effect. The authors highlight the potential of individualized homoeopathic treatment in such cases, though they recommend further large-scale clinical trials to validate these findings [12].

Methodology

The study will involve reviewing articles to evaluate the efficacy of homeopathic remedies for treating warts. Articles regarding patients diagnosed with warts, after detailed classical homeopathic case-taking, individualized remedies, especially medicines documented in literature, were prescribed based on the totality of symptoms and repertorization, and follow-ups were taken. The primary outcomes were a reduction in warts size or complete cure without any recurrency.

Result

Across these six studies evaluating homoeopathic management of warts, promising outcomes were consistently reported. The first study by Md. Ismail Shaikh demonstrated that five cases treated with Thuja and Causticum in centesimal and LM potencies showed complete resolution without recurrence over follow-ups of six months to five years, with LM potencies acting faster. The second study by Manali Vaish explored 15 cases and found plane and common warts most prevalent, with Calcarea carb, Thuja, and Natrum mur being the most prescribed remedies, highlighting homoeopathy as an effective, holistic treatment without adverse effects. The third study by Keerthana *et al*. conducted a randomized controlled trial on 30 patients, showing that Calcarea Calcinata 30C cured 73.33% with significant statistical reduction in wart size ($p<0.0001$), while the placebo group showed negligible improvement, indicating the remedy's potential despite the study's single-blind design and limited sample. The fourth study by Bikash Biswas *et al*. presented four cases treated successfully with individualized remedies-Hepar sulph, Arsenicum alb, and Nat mur-leading to complete wart resolution within 40-45 days, emphasizing constitutional prescribing. The fifth, larger study by Swami Shraddhamayananda involved 200 patients treated mainly with Thuja, Nat mur, and Dulcamara, achieving 88% remission within a month and full recovery by three months, statistically significant compared to controls, and underlining homoeopathy's non-toxic and safe nature for wart treatment. Lastly, the sixth case report by Sivakumar and Mohan highlighted a rare prescription of Carcinosin 200C for a 5-year-old girl with multiple cutaneous warts unresponsive to other systems, achieving complete cure within two months with no recurrence, supported by a MONARCH causality score of +9. Overall, while these studies consistently show high efficacy and no adverse effects, they are limited by small sample sizes (except the 200-case study), lack of double-blinding in some, and absence of long-term recurrence data in a few, suggesting the need for larger controlled trials to scientifically validate homoeopathy's promising role in wart treatment.

Discussion

The collective analysis of these six studies on homoeopathic management of warts reveals strong evidence of clinical efficacy across varied potencies, remedies, and study designs. The first study by Md. Ismail Shaikh highlighted the comparative effectiveness of centesimal versus fifty millesimal potencies, showing that LM potencies produced faster results (within 2-4 weeks) compared to centesimal potencies, with remedies like Thuja occidentalis and Causticum effectively resolving warts without recurrence over long follow-ups. This underscores the importance of potency selection in homoeopathic dermatological prescribing.

The second study by Manali Vaish examined the prevalence of wart types and frequently used remedies among 15 cases, reporting plane warts (40%) and common warts (33.33%) as most prevalent, with Calcarea carb, Thuja, and Natrum mur being the most commonly prescribed remedies. This study reaffirmed the role of these polychrest remedies in routine clinical practice and emphasised the holistic approach of homoeopathy in addressing internal susceptibilities rather than relying solely on external applications or surgical excision.

The third study by Dr. Keerthana *et al*. was significant as it adopted a randomised single-blind control design, assessing Calcarea Calcinata 30C in 30 patients. Results showed a 73.33% cure rate in the treatment group with a statistically significant reduction in wart size ($p<0.0001$), while the placebo group showed minimal change. Despite its limitations (small sample size, single-blind design, and lack of long-term follow-up), this study adds valuable preliminary evidence supporting Calcarea Calcinata, a rarely used remedy, in wart treatment. The fourth study by Bikash Biswas *et al*. presented four case studies treated with individualized prescriptions including Hepar sulph, Arsenicum album, and Natrum muriaticum, each selected based on totality of symptoms and miasmatic analysis. All cases showed complete resolution within 40-45 days, reiterating the homoeopathic principle that individualized constitutional treatment can yield rapid and sustained results even in dermatological conditions like warts.

A more extensive study by Swami Shraddhamayananda evaluated 200 patients, finding 88% remission within 1 month and full recovery by 3 months with ultradiluted remedies including Thuja, Dulcamara, and Natrum muriaticum. Statistical significance ($p<0.0001$) highlighted the superior outcomes compared to the control group, demonstrating the non-toxic, safe, and cost-effective nature of homoeopathy in managing viral warts, which are often recurrent with conventional treatments.

Finally, the sixth study by K. Sivakumar and Mamatha

Mohan reported a single case of cutaneous warts treated with Carcinosin 200C, prescribed constitutionally based on the patient's family history of cancer diathesis. The warts completely disappeared within two months, and a MONARCH causality assessment score of +9 suggested a strong therapeutic link. This study is noteworthy as it highlights the use of Carcinosin, a rare anti-miasmatic nosode, in dermatological conditions where deep constitutional prescribing is indicated.

Collectively, these studies demonstrate the efficacy of homoeopathic medicines in wart treatment, emphasizing:

- Individualisation, miasmatic prescribing, and potency selection as key determinants of success Rapid resolution with minimal adverse effects compared to conventional modalities like cryotherapy or surgical excision, which carry risks of recurrence and scarring.
- The role of both polychrest remedies (Thuja, Causticum, Nat mur) and rare remedies (Calcarea calcinata, Carcinosin) depending on case requirements.

However, certain limitations are evident

- Most studies had small sample sizes, with only one study involving 200 patients
- Lack of double-blind designs in most trials raises risks of observer bias
- Long-term follow-up for recurrence assessment was missing in some reports There is a need for standardised outcome measures and multicentric RCTs to strengthen evidence for academic, clinical, and policy-level integration of homoeopathy in wart management

Conclusion

The cumulative findings from these six studies demonstrate that homoeopathic remedies, when prescribed based on individualisation and miasmatic understanding, are effective in treating various types of warts with high cure rates and minimal or no adverse effects. Remedies such as Thuja occidentalis, Causticum, Calcarea carb, Calcarea calcinata, Natrum muriaticum, Dulcamara, Hepar sulph, Arsenicum album, and even rare remedies like Carcinosin showed significant results, with LM potencies offering faster action in some cases. While these results are promising and support homoeopathy as a safe, holistic, and cost-effective alternative to conventional wart treatments, the studies were limited by small sample sizes, lack of double blinding in some trials, and limited long-term follow-up data. Therefore, larger multicentric randomized controlled trials with robust methodologies are necessary to further validate and establish the scientific evidence base for homoeopathic management of warts in clinical practice.

Conflict of Interest

Not available

Financial Support

Not available

References

1. Dey S, Hashmi S, Saha S, Mandal M, Shaikh AR, Agrawal E, Ghosh P, Sehrawat N, Koley M, Saha S. A randomized, double-blind, placebo-controlled, pilot trial of individualized homeopathic medicines for cutaneous warts. Homeopathy 2021 Aug;110(03):149-159.
2. Banura C, Mirembe FM, Orem J, Mbonye AK, Kasasa S, Mbidde EK. Prevalence, incidence and risk factors for anogenital warts in sub Saharan Africa: a systematic review and meta-analysis. Infect Agent Cancer 2013;8(1):27.
3. Fernandes JV, Fernandes TAAM. Human Papillomavirus: Biology and Pathogenesis. In: Human Papillomavirus and Related Diseases - From Bench to Bedside - A Clinical Perspective. J Intech Open; 2018. p. 1-40.
4. Klaus W, Richard AJ. Fitzpatrick's Clinical Dermatology. 8th ed. London; 2013. p. 4628-4743.
5. Oza PM. Homeopathic Management of Warts. Indian Journal of Drugs in Dermatology 2016 Jan-Jun;2(1):45-47.
6. Allen JH. The Chronic Miasms. Vol. 2. New Delhi: B. Jain Publishers; 2007. p. 65.
7. Shaikh M. Case studies for treatment of warts with Homoeopathy. Indian Journal of Research in Homoeopathy 2016;10(4):272-278.
8. Biswas B, Roy PS, Mandal S, Roy P. Four cases of warts treated by individualized homoeopathic medicine: a clinical case study. Journal of Integrated Standardized Homoeopathy 2022 Jan;5(01):10.
9. Shraddhamayananda S. Healing of skin warts with ultradiluted homeopathic medicines–a study in 200 cases. Clin Res Dermatol Open Access 2017;4(5):1-4.
10. Mohan M. Cutaneous warts treated with a single dose of the homoeopathic medicine Carcinosin 200C: An evidence-based case report. Indian Journal of Research in Homoeopathy 2024;18(2):140-146.

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