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Efficacy of homoeopathy in palmoplantar psoriasis with LM Potency

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Abstract

Palmoplantar psoriasis is a chronic, immune-mediated skin condition predominantly affecting the palms of the hands and soles of the feet. Characterized by erythematous, scaly plaques, fissuring, and often debilitating pain, it significantly impacts patients' quality of life and daily functioning. Unlike classic plaque psoriasis, this localized variant poses unique diagnostic and therapeutic challenges due to its resistance to conventional treatments and frequent overlap with other dermatoses such as eczema and fungal infections.

Case Summary: A female aged 40 years old presented with dry scaly patches in both palms and soles of foot for 6 months. She had itching in palms and soles which led her to scratch, often caused bloody discharge and burning after scratching. Based on presenting symptoms, treatment was started prospectively following homoeopathic principles & follow-ups done in suitable intervals of about 1 month.

Results: Marked improvement was seen in 3 months.

Keywords: LM Potency, palmoplantar psoriasis, individualization, homoeopathic principles, phosphorous

Introduction

Palmoplantar psoriasis is a chronic, immune-mediated, inflammatory skin disorder primarily affecting the palms of the hands and soles of the feet. It is characterized by sharply demarcated, thickened, scaly, and often painful and itchy plaques, which may also crack or bleed. It occurs as a result of an overactive immune system. This condition can significantly impact daily activities due to pain and discomfort in weight-bearing and high-use areas.

Although psoriasis affects approximately 2-3% of the global population, palmoplantar involvement is a relatively less common variant, accounting for around 3-4% of all psoriasis cases. It often proves more resistant to conventional therapies and can severely affect a patient's quality of life, especially when associated with fissures and pain during walking or grasping objects.

The exact etiology remains unclear but is believed to involve genetic predisposition, environmental triggers, and immune system dysregulation. Stress, trauma, infections, and certain foods are known aggravating factors.

From a homoeopathic perspective, palmoplantar psoriasis presents a promising scope for individualized treatment, where remedies are selected based on the totality of symptoms and the patient's constitution. This case report highlights the role of individualized homoeopathic management using LM potency and classical principles in a chronic case of palmoplantar psoriasis.

Case Report

A 40 years old female patient reported in OPD of Dr. GGHMC & H on 17/03/25 with the complaint of dry scaly patches in both palms and soles of foot for 6 months. She had itching in palms and soles which led her to scratch vigorously, often caused bloody discharge and burning after scratching. Itching aggravated at night time and after eating chicken.

On examination dry, scaly and non-defined patches were observed on both of her palms along with dry cracked heels.

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History of presenting complaint

Complaints first started on her right foot and then gradually on both palms and soles were involved. The patches were too dry. She took conventional treatment but got only temporary relief. She worked as a saleslady in clothes shop. Her past and family history were insignificant.

Menstrual and Obstetrics History

She had irregular and scanty menses since 6 months after taking conventional medicine for presenting complaint. Her previous cycles were regular, but now menses delayed by few days and flow also reduced. She underwent two LSCS and no history of abortions.

Mental and Physical Generals

She expressed her desire for company of people, and feared about what others think about her. She was thirst less, drinks less than one litre per day. She desires for sweets and had intolerance to chicken which causes itching, and also cannot tolerate hunger. She had aversion to milk, and fruits. She used to be constipated, goes once in 3 days. She had profuse perspiration on soles and her sleep was disturbed due to itching. She had the habit of drinking tea three times/day. She mentioned her wounds healed slowly.

Diagnosis

Based on clinical history and symptomatology the case was diagnosed as Palmo-Plantar Psoriasis.

Case Analysis and Evaluation

In this case peculiar symptoms of patient were-

- Desires for company of people.
- Sensitive to other's opinion
- Aversion to fruit and milk.

- Desires sweets
- Hunger intolerance
- Wounds healing tendency is slow
- Itching of both palms and soles < night.
- Profuse perspiration on soles

Selection of repertory:

Based on peculiar general symptoms, synthesis repertory was selected.

Rubrics

- Mind-company-desire for
- Mind-sensitive-opinion of others; to the
- Extremities-eruptions-feet-soles-psoriasis
- Extremities-eruptions-hands-palms-psoriasis
- Extremities-perspiration-foot-sole-profuse
- Generals-food and drinks-fruit-desire
- Generals-food and drinks-milk-aversion
- Generals-food and drinks-sweets-desire
- Generals-hunger-agg.
- Generals-wounds-heal; tendency to-slowly.

Selection of remedy

The medicines which covered most of the symptoms were phos, sulph, sil., calc. and lyc. Considering the presenting symptoms, totality was formed and phosphorous 0/1 was prescribed along with her birth salt Kali sulph 6x.

Results

After first prescription, marked improvement occurred in follow up seen on 23/05/25. Dry scaly patches on both palms and soles reduced. Itching reduced and generals also improved. Her stools became soft and regular and her sleep quality improved.



Fig 1: Progression of hand dermatitis treatment over time

Conclusion

The above case shows that individualized medicine can treat the disease rapidly, gently and restores well-being of the patient. This case has highlighted the importance of holistic approach in the treatment considering the individuality of a patient and the use of repertorization for the remedy selection.

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Conflict of Interest

Not available

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