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Homoeopathic Treatment of Leucoderma, A Case Report

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Abstract

Leucoderma (vitiligo) is a chronic depigmentary disorder with major psychosocial impact. This case report discusses the treatment of an 24year old female patient with white depigmented patches below both the eyes since 1year. The patches were asymptomatic with no itching, pain or scaling, but posed significant cosmetic concern, leading to social embracement and anxiety about future prospects. A detailed case history was taken followed by repertorization of patient symptoms using complete repertory with RADAR software. sepia 200c was selected as the simillimum, counselling and lifestyle advice were provided along with placebo support. The case illustrates a classical individualized homoeopathic approach in managing localized leucoderma, emphasizing not only the cutaneous manifestation but also the patient psychosocial impact and constitutional features.

Keywords: Leucoderma, Sepia, cosmetic concern, case report, homeopathy

Introduction

Leucoderma is a chronic acquired depigmentary condition characterized by the selective destruction of melanocytes, resulting in well-demarcated white macules on the skin ^[1]. Although the disease does not affect physical health directly, its cosmetic impact—particularly when lesions appear on the face—can cause profound psychological distress, social withdrawal, and reduced quality of life ^[2]. The global prevalence is estimated between 0.5% and 2%, with higher visibility and psychosocial consequences in darker-skinned populations ^[3]. The etiology is multifactorial, involving genetic susceptibility, autoimmune mechanisms, oxidative stress, cosmetics and neurogenic pathways ^[4]. Conventional treatment options include topical corticosteroids, calcineurin inhibitors, phototherapy, systemic immunomodulators, and surgical interventions, but these approaches often produce partial, variable, or temporary improvement ^[5]. Homoeopathy emphasizes individualized treatment, taking into account not only the local skin manifestations but also the patient's mental, emotional, and physical constitution ^[6]. This holistic approach aims to address both the visible disorder and its psychosocial consequences. The present case illustrates the role of individualized homoeopathic prescribing in a young female with localized facial vitiligo. Remedies like Sepia, Natrum muriaticum, Arsenicum sulphuratum flavum, Sulphur, and Calcarea carbonica are frequently indicated. This report highlights the effectiveness of Sepia in the treatment of leucoderma.

Material and Methods

Study Type: Single case report

Methodology: Detailed homoeopathic case-taking, repertorial analysis, remedy selection, and follow-up.

Evaluation: Clinical observation of repigmentation and general well-being over a 4month follow-up period.

Case summary

ICD code: EK5Y

Personal data

Name: Mrs. XYZ

Age: 24years

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Sex: Female**Occupation:** student**Marital Status:** unmarried**Chief Complaint**

C/o; White depigmented patches below both the eyes since 1 year.

Gradually spreading, no itching, no scaling.

Cosmetic concern, social embarrassment.

History of Presenting Complaint

White patches first appeared below the left side of eye and then spreads to right side below the eye. onset is gradually progressive since 1 year. No associated pain, discharge, or scaling. Tried allopathic ointments and supplements with no significant relief. Aggravation by scratching and amelioration after cold bathing.

Past History

History of typhoid fever at age 15.

No history of diabetes, tuberculosis, asthma, hypothyroidism, or hypertension.

No past skin diseases.

Family History**Mother:** hypothyroidism.**Father:** hypertension.**Maternal aunt:** vitiligo.**Personal History****Diet:** Mixed.**Appetite:** good**Thirst:** Normal**Desire:** Strong craving for sour and pickles.**Aversion:** Aversion to milk.**Bowel:** Regular, occasionally constipated.**Urine:** 4-5/0-1: Day/night, normal.**Sleep:** Disturbed, due to anxious thoughts.**Thermal reaction:** Chilly patient.**Habits:** nil**Vitals:** BP-120/80mmhg; PR- 84bpm;

RR-16cpm; Temp- Afebrile.

Menstrual History**Menarche:** at 13 years.**Cycles:** regular (28–30 days).**Flow:** Moderate, lasting 3–4 days.**Mentals**

Indifferent to family, avoids household duties.

Irritable if frequently asked questions.

Desire for solitude, yet dislikes being completely alone.

Fear of being ridiculed in society due to patches.

Local Examination

Multiple depigmented patches below both the eyes, reddish colour, irregular in shape, well-defined margins.

No scaling, no elevation, no itching.

No systemic involvement.

Provisional Diagnosis: Leucoderma**Analysis and evaluation****Mental Generals****Grade 1:** Indifferent to family, avoids household duties.

Irritable if frequently asked questions. Desire for solitude,

yet dislikes being completely alone. Fear of being ridiculed in society due to patches.

Physical Generals**Grade 2:** Desires for sour and pickles.

Aversion to milk.

Sleep disturbed due to anxious thoughts.

Grade 3: Chilly patient.**Perticulars****Grade 2:** Aggravation by scratching

Amelioration after cold bath.

Grade 3: White depigmented patches below both the eyes.**Totality of symptoms**

1. Indifferent to family, avoids household duties.
2. Irritable if frequently asked questions.
3. Desire for solitude, yet dislikes being completely alone.
4. Fear of being ridiculed in society due to patches.
5. Thermal reaction: Chilly patient.
6. Desire for sour and pickles.
7. Aversion to milk.
8. Sleep Disturbed due to anxious thoughts
9. White depigmented patches below both the eyes.
10. Aggravation by scratching & Amelioration after cold bath.

The screenshot shows a software interface for Repertorial Analysis. At the top, there are input fields for 'Symptoms: 11' and 'Remedies: 756'. Below these are tabs for 'Show Repertorial Tools', 'Prescribe', 'Remedy List', 'Record', 'Replace', 'View All', and 'More Results'. The main area is a grid with columns for various symptoms (Sep, Phos, Lach, Ars, Sulph, Hep, Puls, Nat-m, Sil, Lyc, Calc, Verat) and rows for different remedies. Each cell in the grid contains a numerical value representing the strength of the remedy for that symptom. The interface is color-coded with green, yellow, and red backgrounds for different sections.

Fig 1: Repertorial Analysis**Rubrics considered as per complete repertory**

Mind: indifference, apathy: loved ones, to

Mind: indolence, aversion to work

Mind: Irritable: questioned when

Mind: Company: desire for: alone, agg. being
 Mind: Looks, appearance, concerned about
 Generalities: Food and drinks:sour, acid: desires
 Generalities: Food: pickles: desire
 Sleep disturbed: thoughts.by
 Generalities: drinks: milk: aversion
 Face: white patches
 Skin: scratching: agg

Differential Remedies: Sepia, Natrum muriaticum, Sulphur, Calcarea carb.

Final Selection: Sepia 200C

Prescription

Rx; Sepia 200c; OD for 15days.
 PL for 1month.

Follow ups

Date	Symptoms	Prescription
25-5-2025	Improved mood, less irritability.	Sepia 200, OD; for 15days
22-6-2025	Margins of patches showed faint brown pigmentation.	Sepia 200,OD; for 15days
27-7-2025	40% reduction in patch size, bearing down sensation reduced.	Placebo for 1 month
24-8-2025	80% repigmentation achieved, patient's confidence and general well-being improved.	Sepia 1M, OD; for 3 days



Before treatment



After treatment

Discussion

The case highlights the role of individualized homoeopathy in chronic skin conditions. Sepia was prescribed based on totality—mental indifference, irritability, bearing down sensation, and food cravings/aversions. The progressive repigmentation and improvement in general health support the efficacy of constitutional prescribing.

Homoeopathy does not act directly on melanocytes, but by correcting the disturbed vital force, it restores systemic balance, leading to visible improvement in skin lesions. This case aligns with earlier reports where individualized remedies yielded significant improvement in leucoderma.

Conclusion

Sepia, selected through detailed case history and repertorial analysis, proved effective in treating leucoderma in this case. The patient showed not only cosmetic improvement but also better general and emotional health. Although the patient was on treatment and she has dropped out. Further large-scale clinical studies are recommended to validate these findings.

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