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## LM potency in individualized homeopathic management of lichen planus: A case study and treatment approach

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#### Abstract

Lichen planus is a multidimensional inflammatory illness that affects the skin, oral mucosa, nails, and genitals. This article describes the case of a 49-year-old female patient with lichen planus symptoms and investigates the homoeopathic treatment technique. Thuja was identified as the best therapy based on the patient's specific symptom presentation using Repertorization. The justification for remedy selection and the application of LM potency are extended, providing insight into individualised treatment methods for lichen planus.

Keywords: Lichen planus, inflammatory disorder, skin, case study, homeopathic approach, repertorization, thuja, LM Potency, individualized treatment

#### Introduction

Lichen planus is a complex inflammatory disorder affecting the skin, hair, nails, mouth, and genitals, presenting as itchy purple bumps on the skin and white patches with sores in the mouth and genital areas. Lichen simplex chronicus, stemming from an itch-scratch cycle, results in well-defined, lichenified plaques, often on the neck, arms, and legs. Despite its unclear cause, lichen planus manifests as pruritic, violaceous papules and plaques, commonly observed on the wrists, lower back, and ankles, with characteristic Wickham striae. While cutaneous lesions may spontaneously resolve within 1 to 2 years, recurrences and hyperpigmentation are frequent, contrasting with the chronic nature of oral lichen planus. Discontinuation of the causative medication typically resolves drug-induced lichen planus [1] [2] [3] [4].

#### **Symptoms**

Symptoms of lichen planus can vary depending on the affected area of the body.

#### Skin:

- Purple, shiny, flat bumps, primarily on inner forearms, wrists, or ankles.
- Lines of rash where scratching has occurred.
- Fine white lines or scales accompanying the bumps.
- Thick scaly patches on shins and ankles.
- Dark skin patches replacing faded bumps over time.

#### Mouth

- Lacy patches of tiny white dots inside cheeks or on the tongue.
- Redness and sores in severe cases.

#### **Nails**

Thinning, ridges, splitting, or loss on fingernails and toenails.

#### Scalp

- Redness, irritation, and tiny bumps.
- Hair thinning or patches of hair loss in some cases.

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#### Genitals

• Red, painful areas [3] [4].

#### **Causes of Lichen Planus:**

- a) Immune System Reaction: Lichen planus is believed to result from the immune system attacking cells of the skin or mucous membranes, although the exact trigger for this irregular immune response remains unclear. The condition is not contagious.
- b) **Hepatitis C Infection:** Lichen planus may be activated by hepatitis C infection, suggesting a potential viral trigger for the immune response.
- c) Medications: Certain medications, including pain relievers and drugs used to treat arthritis, heart disease, high blood pressure, and malaria, can trigger lichen planus in susceptible individuals.
- d) Allergic Reactions: Allergic reactions to substances such as metals in dental fillings, medications, dyes, and other chemical substances have been associated with the development of lichen planus.
- e) Other Medical Conditions: Medical conditions such as hypertension, diabetes, and peptic ulcers have been linked to oral lichen planus, suggesting possible underlying health factors contributing to the condition [1] [2] [5] [6]

#### **Risk Factors for Lichen Planus**

- a) **Age:** While lichen planus can affect individuals of any age, it most commonly occurs in middle-aged adults.
- b) **Gender:** Lichen planus in the mouth is more frequently observed in women compared to men, suggesting a potential gender-specific risk factor for oral involvement [7].

#### **Case Study**

Mrs. Y, a 49-year-old Muslim woman residing in South Kolkata, falls under the category of low socioeconomic status. She presented at the college OPD with a chief complaint of itching eruption on both forelegs, characterized by scaly shiny black & Purple-colored patches persisting for the past 8 years. The condition initially started as a small circle, exacerbated by rubbing and improved with undressing. Additionally, she complained of back pain persisting for the last year, worse, at night. Mrs. Y also reported the presence of corns on her hands and feet.

On a Mind level, Mrs Y manifests high levels of anxiety about the future, exhibiting strong religious beliefs with a fervent and uncompromising attitude. She displays monomaniacal tendencies and holds fixed ideas. In terms of her general physical state, she is prone to feeling chilly. Her

desires include a preference for seasonal foods, while she strongly dislikes potatoes and desire cold water. Interestingly, Mrs Y experiences heightened thirst, particularly during the night.

#### **Analysis of Case**

#### a) Physical General

- 1. Chilly.
- 2. Increased thirst, particularly at night.
- 3. Desire for cold water.
- 4. Strongly dislikes potatoes.

#### b) Mental General

- 1. Anxiety regarding the future.
- Strong religious beliefs with an uncompromising attitude: Firm religious convictions coupled with an inflexible attitude.
- 3. Monomaniacal tendencies and fixed ideas.

#### c) Particulars

- 1. **Itching eruption on forelegs:** Scaly, shiny, black patches that worsen with rubbing and improve with undressing.
- 2. Back pain, worse, at night
- 3. Corns on hands and feet.

#### **Evaluation of Symptoms**

- 1. Thirst, especially during the night
- 2. Anxiety about the future:
- 3. Strong religious beliefs with an uncompromising attitude:
- 4. Monomaniacal tendencies and fixed ideas
- 5. Aversion: potatoes
- 6. Desire: cold water.
- 7. Eruption with itching
- 8. Back pain, worse, at night
- 9. Corns on hands and feet.

Table 1: Rubric

S.no.	Rubric
1.	Mind - Anxiety - future, about
2.	Mind - Fanaticism
3.	Mind - Monomania
4.	Stomach - Thirst - night
5.	Extremities - Warts - feet
6.	Extremities - Warts - Hands
7.	Skin - Eruptions - itching
8.	Skin - Eruptions - scaly
9.	Generals - Food and Drinks - cold drink, cold water, desire
10.	Generals - Food and Drinks - Potato aversion

#### Repertorization

MIND	Remedies	ΣSym	ΣDeq	Symptoms
1 MIND - ANXIETY - future, about	Kemeules	Zoyiii	ZDCg	dymptoms
2 MIND - FANATICISM	thuj.	10	15	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
3 MIND - MONOMANIA				
STOMACH	sulph.	9	18	1, 2, 3, 4, 5, 6, 7, 8, 9
4 STOMACH - THIRST - night	•			
EXTREMITIES	phos.	8	17	1, 4, 5, 6, 7, 8, 9, 10
5 EXTREMITIES - WARTS - Feet				
6 EXTREMITIES - WARTS - Hands	sep.	8	15	1, 4, 5, 6, 7, 8, 9, 10
SKIN				
7 SKIN - ERUPTIONS - itching	sil.	8	14	1, 3, 4, 5, 6, 7, 8, 9
8 SKIN - ERUPTIONS - scaly				
GENERALS	calc.	7	15	1, 4, 5, 6, 7, 8, 9
9 GENERALS - FOOD and DRINKS - cold drink, cold water - desire	rhus-t.	7	14	1, 3, 4, 6, 7, 8, 9
10 GENERALS - FOOD and DRINKS - potatoes - aversion				

Fig 1: Showing repertorization of case from Synthesis Repertory Mobile Version

Table 2: Remedies

S.no.	Medicine	Marks Obtained
1.	Thuja	$10^{15}$
2.	Sulphur	918
3.	Phosphorus	8 <sup>17</sup>
4.	Sepia	815
5.	Silicea	814

#### Justification

Thuja is indicated as the most appropriate homeopathic remedy not merely due to its numerical superiority in symptom coverage but because it exhibits the closest correspondence to the patient's totality of symptoms, adhering to the principle of individualization central to homeopathic practice. Since the patient's strong dislike of potatoes and cold constitution are exactly in line with traditional Thuja profiles, remedies like sulphur that are associated with heat or potato craving are effectively ruled out. Thuja's strong affinity for prominent mental symptoms, particularly "fanaticism," which are clearly present and highly weighted in this instance, further supports the prescription. Thuja also addresses the important general symptom of night-time thirst, a key rubric insufficiently covered by other leading remedies in consideration. According to the evidence-based repertorization and the fundamental principles of Hahnemannian methodology, Thuja was chosen as the simillimum because of its thorough alignment with the patient's distinctive bodily modalities

and mental state from a scientific and homoeopathic standpoint.

Potency Selection: LM Potency 0/1

#### **Justification for Potency**

LM potencies are commonly chosen because they provide accurate dosage modifications, which is especially helpful for people with chronic illnesses or allergies. They are suitable for long-term usage because the preparation technique of progressive dilution and succussion reduces the possibility of aggravations or negative responses. Because of their frequent succussions, LM potencies maintain their increased potency despite their considerable dilution, allowing for a mild yet significant impact on the vital force. They are therefore well-suited for long-term management of chronic diseases. Furthermore, because LM potencies may be tailored to each patient's specific symptom profile, they provide a more individualised approach to treatment and promote a comprehensive and complete healing process [8]

Table 3: Prescription

Date	Prescription
	Rx
17/11/2023	Thuja 0/1, OD, 15 DAYS
	Rubrum 30, BD, 15 Days

Table 4: Follow up

Date	Symptom	Prescription
1/12/2023	Improvement	Rx, Thuja 0/2, OD, 15 DAYS
1/12/2023		Rubrum 30, BD, 15 Days
16/12/2023	Improvement	Rx, Rubrum 30, BD, 15 Days
30/12/2023	Improvement	Rx, Rubrum 30, BD, 15 Days
14/01/2024	Improvement	Rx, Rubrum 30, BD, 15 Days
29/01/2024	Improvement	Rx, Rubrum 30, BD, 15 Days
15/02/2024	Improvement	Rx, Rubrum 30, BD, 15 Days

#### Picture



Fig 2: Before treatment and after treatment images

#### Conclusion

The article may emphasise the efficacy of homoeopathic treatment, namely with Thuja in LM potency, in alleviating lichen planus symptoms. The case study demonstrates the significance of individualised approach, addressing both the physical and psychological dimensions of the patient's health. By addressing specific symptoms such as anxiety, strong religious beliefs, thirst patterns, and aversions, the

selected remedy led to significant improvement over the course of follow-up appointments.

**Conflict of Interest:** There is no conflict of interest.

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#### **How to Cite This Article**

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