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Homoeopathic treatment of tinea corporis: A case report

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Abstract

Background: Tinea corporis is a superficial fungal infection caused by dermatophytes such as Trichophyton, Microsporum, and Epidermophyton species. It manifests as ring-shaped erythematous lesions with severe itching, burning, and oozing discharges. Contributing factors include poor hygiene, hot and humid climate, and immunosuppressive conditions.

Objective: To evaluate the efficacy of individualized homoeopathic treatment in managing a case of chronic tinea corporis and improving both physical and mental health symptoms.

Method: A 24-year-old male presented with a 4-month history of ring-shaped, erythematous, itchy, and burning lesions on the left medial aspect of thigh, knee, and foot, accompanied by sticky, offensive discharge. Detailed case history, mentals, physicals, and particular symptoms were used for repertorization. Graphites 200C was selected based on totality of symptoms. Follow-up assessments were conducted over several months, monitoring symptom improvement.

Results: Initial symptoms included severe itching, burning, and offensive discharge, aggravated by scratching, sweat, and tight clothing. After administration of Graphites 200C followed by placebo, the patient showed gradual marked improvement in itching, burning, and reduction of discharge. Mental well-being improved in parallel. By the last follow-up, the patient reported significant symptom relief and improved quality of life.

Conclusion: The case illustrates the efficacy of homoeopathy, particularly Graphites 200C, in managing tinea corporis by addressing both physical and mental symptoms through individualized treatment. Homoeopathic approach demonstrates a safe and holistic management strategy for chronic dermatophytic infections.

Keywords: Tinea corporis, homoeopathy, case study, graphites, individualization

Introduction

Tinea is a ringworm infection caused by a distinct class of fungi, the dermatophytes. Dermatophytes are caused by species of genera "Trichophyton", "Microsporum", "epidermophyton". The common species encountered in ringworm infection are:- Microsporum audouinii, Trichophyton rubrum, T.schoenleinni, Epidermophyton floccosum.

Aetiology

- Poor nutrition
- Unhygienic conditions
- Hot and humid climate
- Sweating
- Diabetes mellitus
- Corticosteroids
- Immunosuppressive agents
- Close and intimate contact with infected persons.

Classification of tinea based on anatomical area

- Tinea capital
- Tinea barbie
- Tinea faciei
- Tinea corporis
- Tinea cruise

- Tinea magnum
- Tinea Pedia
- Tinea unguium

Tinea corporis ^[2]

Tinea corporis is a superficial fungal infection of the skin that can affect any part of the body, excluding the hands and feet, scalp, face and beard, groin, and nails. It is commonly called 'ringworm' as it presents with characteristic ring-shaped lesions.

Clinical features

- 1) Tinea corporis initially presents as a solitary circular red patch with a raised scaly leading edge.
- 2) A lesion spreads out from the centre forming a ring-shape with central hypo pigmentation and a peripheral scaly red rim (ringworm).
- 3) The border can be papular or pustular.
- 4) Itch is common.
- 5) With time, multiple lesions can develop which may coalesce to form a polycyclic pattern.
- 6) The distribution of lesions is typically asymmetrical.²

General management

- Maintain personal hygiene.
- Avoid sharing clothes, towels, bed etc.
- Wear loose fitting cotton clothes to reduce moisture.
- Wash clothes in hot water & dry them under sunlight.

Graphities constitution according to different authors

Like all the carbons, this remedy is an anti-psoric of great power. It has marked action on skin but especially active in patients who are rather stout, of fair complexion, with tendency to skin affections and constipation, fat, chilly, and take cold easily. Has a particular tendency to develop the skin phase of internal disorders. Eradicates tendency to erysipelas. Anaemia with redness of face. Tendency to obesity. Induration of tissue.³

Grief and vexation cause of recurrence of all her distressing mental sufferings.⁴

Case proper**Preliminary data**

Name: XYZ

Age: 24Years

Sex: Male

Education: M.Sc.

Occupation: Student

Religion: Hindu

Socio-economic status: Middle class

Marital status: Unmarried

Date of admission: 12/03/25

Address: Kerur

Chief complaints

C/o Ring shaped eruption on left medial aspect of thigh, left extensor surface of knee & foot with severe itching & burning since 4 months.

Details of presenting complaints

C/o Ring shaped eruption on left medial aspect of thigh, left extensor surface of knee & foot with severe itching & burning

Duration: 4 months

Onset: Insidious & gradually progressive

Location: Left medial aspect of thigh, left extensor surface of knee & foot.

Sensation: Severe burning & Itching of eruption.

Character: Ring shaped, erythematous patches with raised margins & well demarcated margins.

Multiple patches are present. The large patches are irregular in size & shape & small lesions are round in shape.

Oozing of sticky discharge, offensive.

Modalities: <after scratching, night, after sweat, wearing tight jeans.

No ameliorating factor.

Past history

Patient had skin allergy in childhood & had similar complaints of eruption 1 year back at same location but it was cleared after allopathic treatment.

Family history

Father: Apparently healthy

Mother: Died due to MI 1.5year back.

Personal history

Diet: Vegetarian

Appetite: Good

Thirst: 2-3 liters/day

Desire: Spicy & fried food.

Aversion: Nothing specific

Micturition: 4-5/0-1 D/N

B/M: Once daily, satisfactory

Perspiration: Generalised

Sleep: Disturbed due to itching.

Thermals: Chilly pt.

Life space investigation

The patient was born & brought up in Kerur. He has completed PUC in Badami & now studying M.Sc. Patient wants to be alone & doesn't want to make friends. He was very sensitive & emotional. Complaints started after death of his mother. As he was the only child to his parents, he was emotionally dependent on his mother. The patient always covers affected area and hesitates to show it to others. He is reserved & doesn't want to express his feelings & anxious about his disease.

Mentals

- Anxious about health.
- Grief.
- Reserved.
- Sensitive & emotional.
- Wants to be alone.

General physical examination

- **Built & nourishment:** Well built & nourished.
- **Weight:** 56kg
- **Height:** 5.4ft

Vital signs

BP: 130/80mmhg

PR: 79bpm.

RR: 16cpm.

TEMP: 98.6 F

Systemic examination**CVS:** S1, S2 Heard & No murmur.**CNS:** Conscious & oriented to time, place & person.**RS:** NVBS Heard.**GIT:** 2-3 Peristaltic sound heard /10sec.**Local examination of skin****Inspection**

- **Location:** Left medial aspect of thigh, left extensor surface of knee & foot.
- **No. of lesion:** Multiple patches
- **Shape of lesion:** Small lesion - Ring shaped
- Larger lesion - Irregular in shape
- **Colour:** Reddish.
- **Margins:** well defined, active, elevated borders.
- No h/o vesicles (or) pustules.
- **Surface changes:** Scaly surface esp., at margins.

Palpation: No local rise temperature.

No h/o pain.

- **Texture:** Raised edges with rough scaly feel.
- **Induration:** Borders slightly thickened.
- **Auspitz's sign:** Negative.

Provisional diagnosis: Tinea corporis**Analysis of symptoms****Mental generals**

- Anxious about health
- Sensitive & emotional
- Grief
- Reserved
- Wants to be alone

Physical generals

Desires - spicy & fried food

Sleep - disturbed due to itching

Chilly patient

Particulars:

- Ring shaped eruptions on left medial aspect of thigh, left extensor surface of knee & foot.
 - Severe itching & burning.
 - Ring shaped, erythematous patches with raised margins & borders are well demarcated.
 - Oozing sticky discharge, offensive.
- < after scratching, after sweat, night, wearing tight jeans.

Evaluation of symptoms**Mental generals****G1:** Anxious about health

- Sensitive & emotional
- Grief
- Reserved
- Wants to be alone.

Physical generals**G2:** Desire- spicy & fried food

Sleep disturbed due to itching

G3: Chilly patient.**Particulars****G2:** Ring shaped erythematous patches with raised margins & well demarcated borders.

< after scratching, after sweat, night, wearing tight jeans

G3: Severe itching & burning.

- Oozing of sticky discharge.
- Offensive.

Miasmatic background: Psoro-sycosis.**Totality of symptoms**

- Anxious about health
- Sensitive & emotional
- Grief
- Reserved
- Wants to be alone
- Desires spicy & fried food
- Sleep disturbed due to itching
- Chilly patient.
- Ring shaped, erythematous patches on left medial aspect of thigh, left extensor surface of knee & foot with raised margins & ell demarcated borders.
- < after scratching, after sweat, night, wearing tight jeans
- Severe itching & borders.
- Oozing of sticky discharge & offensive.

Repertorial totality

Symptoms selected for repertorization	Symptoms kept in PDF
<ul style="list-style-type: none"> • Anxious about health • Reserved • Sensitive • Grief • Desires fried food • Sleep disturbed • Erythematous eruptions • Burning pain • Itching • Oozing of sticky fluid, offensive • Aggravation at night 	<ul style="list-style-type: none"> • Wants to be alone • Chilly patient • Aggravation after scratching, wearing tight jeans.

Repertory used: Complete repertory.**Software used:** Homopath.

Repertorisation Sheet - Zomeo LAN 3.0															
Physician Name : Dr. BVVSHMC , Patient Name : , Reg. No. : , Date : 10/09/2025															
Remedy	Graph	Phos	Ars	Nat-m	Calc	Puls	Sulph	Caust	Lyc	Cocc	Merc	Sil	Aur	Ph-ac	Kali-c
Totality	37	37	36	35	35	35	35	34	33	32	32	32	32	32	31
Symptoms Covered	11	10	11	11	10	10	10	10	10	10	10	10	9	9	10
[Complete] [Mind] Sadness:Anxious:	3	4	3	1	1	1	3	1	3	1	1	0	3	0	2
[Complete] [Mind] Reserved:	1	4	1	3	3	3	1	3	1	1	1	3	3	1	3
[Complete] [Generalities] Sensitiveness:	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
[Complete] [Mind]Grief:	4	2	3	4	3	4	3	4	4	4	3	1	4	4	1
[Complete] [Generalities]Food and drinks:Fried food:Desires:	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0
[Complete] [Sleep] Disturbed:	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
[Complete] [Extremities] Eruptions:Erythematous:	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0
[Complete] [Generalities]Night, nine pm. - five am.:Agg.:Bed, in:	1	4	4	3	4	4	4	3	1	3	3	3	3	3	2
[Complete] [Extremities] Pain:Burning, smarting:Lower limbs:	4	4	4	4	4	4	4	4	4	4	4	4	3	4	4
[Complete] [Extremities] Pain:Burning, smarting:Feet:	4	3	4	4	4	3	4	3	4	4	4	4	0	4	3
[Complete] [Extremities] Itching:Lower limbs:	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
[Complete] [Skin] Eruptions:Discharging, moist:Sticky:	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0
[Complete] [Generalities] Discharges, secretions:Offensive, fetid:	4	4	4	3	4	4	4	4	4	3	4	4	4	4	4

Repetorial result & analysis

Sl. No.	Rubrics [As per complete repertory]	Remedy covered
1	[Mind] Sadness, Anxious	Graph, Phos, Ars, Nat-m
2	[Mind] Reserved	Graph, Phos, Ars, Nat-m
3	[Generalities] Sensitiveness	Graph, Phos, Ars, Nat-m
4	[Mind] Grief	Graph, Phos, Ars, Nat-m
5	[Generalities] Food & drinks: Fried food desires	Nat-m, sil
6	[sleep] Disturbed	Graph, Phos, Ars, Nat-m
7	[Extremities] Eruptions: Erythematous	Ars
8	[Generalities] Night 9pm-5am., Agg: Bed, in:	Graph, Phos, Ars, Nat-m
9	[Extremities] pain: Burning, smarting: Lower limb	Graph, Phos, Ars, Nat-m
10	[Extremities] Pain: Burning, smarting: Feet:	Graph, Phos, Ars, Nat-m
11	[Extremities] Itching: Lower limb	Graph, Phos, Ars, Nat-m
12	[Skin] Eruptions: Discharging, moist: sticky	Graph
13	[Generalities] Discharges, secretions: Offensive, fetid	Graph, Phos Ars, Nat-m

Repertorial result

Graphites - 37/11

Phosphorus - 37/10

Arsenicum album - 36/11

Natrum-mur - 35/11

Final remedy selected: Graphites.

The choice of graphites was based on the principle of individualization & totality of symptoms, where both mentals & particulars pointed strongly toward this remedy.

Prescription: Graphites 200C Single dose followed by placebo.

Repertorial confirmation

Although remedies like Phosphorus, Arsenicum album, Natrum-muriaticum also came up in repertorization, but the constitution, mentals & particular symptoms were strongly covered by graphites.

Follow up

Date	Symptoms & observations	Prescription
12/03/25	Ring shaped rashes on left medial aspect of thigh, left extensor surface of knee, foot with severe itching & burning. Small circular and irregular patches present. <night, after scratching, after sweat, wearing tight jeans. Oozing of sticky fluid. Weeps remembering his mother.	Graphites 200C single dose. Placebo for 20 days
02/04/25	Slight improvement in itching. Burning after scratching is still present. Discharge slightly reduced. Patches present.	Placebo
5/05/25	Marked improvement in itching & burning. Patches slightly reduced in size. Discharge reduced completely.	Placebo
02/06/25	No further improvement.	Graphites 200C single dose. Placebo 20 days
01/07/25	Marked improvement in itching, burning & rashes. Patches reduced. Patient is feeling better.	Placebo

Discussion

The case was managed on the principle of individualization & totality of symptoms. Graphites was selected as the constitutional remedy due to its marked sphere of action on skin. The patient's mental state (anxious about health, wants to be alone, reserved, grief, sensitive & emotional), physical generals (desires for spicy & fried food, disturbed sleep due to itching, chilly 7 pt), particulars (Ring shaped,

erythematous eruption with oozing of sticky discharge, which is offensive & < after scratch, after sweat, night, wearing tight jeans) strongly corresponded with remedy picture.

This highlights the importance of holistic evaluation in homoeopathic prescribing, as the remedy not only relieved mental generals but also improved his physical generals, particulars & overall quality of life.



Before treatment



After treatment

Conclusion

Homoeopathy provides safe & individualized approach in managing tinea infection. This case demonstrates the efficacy of graphites in improving both mentals & particular symptoms, thereby enhancing patient well-being.

References

1. Sehgal VN. Textbook of Dermatology. 5th ed. New Delhi: Jaypee Brothers Medical Publishers; c2019, p. 55.
2. DermNet. Tinea corporis. Auckland (NZ): DermNet; 2023. Available from: <https://share.google/71nniKW9A6v8VpSCj>
3. Boericke W. Pocket Manual of Homoeopathic Materia Medica. 9th ed. New Delhi: B. Jain Publishers; 2016.
4. Kent JT. Repertory of the Homoeopathic Materia Medica. New Delhi: B. Jain Publishers; 1933.
5. Sarkar BBK. Sarkar's Repertory of Homoeopathic Materia Medica. Kolkata: Sree Guru Publications Pvt Ltd; 2005.
6. Allen HC. Keynotes and Characteristics with Comparisons of Some of the Leading Remedies of the Materia Medica. New Delhi: B. Jain Publishers; 2004.

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