

International Journal of

of Homoeopathic Sciences

E-ISSN: 2616-4493 P-ISSN: 2616-4485 Impact Factor (RJIF): 5.96 www.homoeopathicjournal.com IJHS 2025; 9(4): 691-694

IJHS 2025; 9(4): 691-694 Received: 15-08-2025 Accepted: 18-09-2025

Dr. Mazhar Qureshi

Oualification BHMS,
Designation Head Medical
Services, Dr Batra's Positive
Health Clinic Pvt. Ltd.,
Nagpur Branch, Maharashtra,
India

Syphilinum in the management of cicatricial alopecia: A clinical case study

Mazhar Qureshi

DOI: https://www.doi.org/10.33545/26164485.2025.v9.i4.K.1985

Abstract

Chronic patchy hair loss, or alopecia, is a common condition affecting individuals worldwide, with both scarring (cicatricial) and non-scarring forms. It can result from genetics, infections, autoimmune disorders, or stress, and often impacts self-esteem and social confidence.

Homeopathy offers a holistic approach, considering both physical and emotional aspects. This case study reports a 45-year-old female with long-standing patchy hair fall and cicatricial scalp lesions, treated at Dr. Batra's. Constitutional remedy Syphilinum 200C. The patient experienced stabilization of hair fall, improved hair density, and enhanced confidence, highlighting the role of constitutional homeopathic treatment, miasmatic assessment, and individualized therapy in chronic hair disorders. This case demonstrates the efficacy of homeopathy in managing long-standing alopecia and improving both physical and emotional well-being.

Keywords: Chronic hair loss, alopecia, syphilinum, homeopathy, cicatricial patches

Introduction

Hair loss or alopecia is a condition characterized by partial or complete loss of hair from the scalp or other body areas. It can be scarring (cicatricial), where hair follicles are destroyed, or non-scarring, where follicles remain intact. Causes include genetic predisposition, autoimmune disorders, hormonal imbalance, infections, chronic illnesses, and emotional stress. Clinically, alopecia manifests as patchy hair fall, thinning, bald patches, and changes in scalp texture such as dryness or shininess. Patients may also experience mild itching or discomfort.

Complications extend beyond the physical appearance; chronic hair loss can lead to psychological distress, low self-esteem, social anxiety, and reduced quality of life. Conventional treatments include topical or systemic medications, laser therapy, or surgical interventions.

Homeopathy provides a holistic approach, focusing on individualized remedies based on constitutional type, mental-emotional state, and miasmatic tendencies. Remedies aim not only to reduce hair fall but also to restore hair density, improve scalp health, and support overall emotional well-being. This paper discusses a detailed case study of a patient with long-standing patchy hair loss treated successfully using homeopathy, highlighting therapeutic strategy, follow-up, and outcomes.

Case profile

45 years old female patient had been struggling with patchy hair fall for the past 11-12 years, despite having tried allopathic treatments. The hair loss was persistent, affecting multiple areas of the scalp, which appeared dry and shiny. The patient experienced mild itching occasionally, and the chronic hair fall caused visible bald patches, leading to distress and lowered self-confidence. Over the years, the patient felt anxious about appearance and avoided social situations at times due to fear of judgment. Past medical history included occasional viral fevers, and the patient also reported intermittent pain in the finger joints. The long-standing hair loss created a constant sense of frustration and emotional discomfort, impacting the patient's overall well-being and quality of life.

Physical generals

• **Diet:** Balanced, takes home-cooked meals, includes protein and vegetables

Corresponding Author: Dr. Mazhar Qureshi Qualification BHMS, Designation Head Medical Services, Dr Batra's Positive Health Clinic Pvt. Ltd., Nagpur Branch, Maharashtra, India

- Appetite: Moderate, sometimes irregular due to stress
- **Desire** (**cravings**): Craves sweets occasionally
- Aversion: Avoids oily and fried foods
- Thermal reaction (hot/cold preference): Prefers cooler climates, intolerant to heat
- **Thirst:** Drinks 2-3 liters of water daily
- Stools: Regular, formed
- Urine: Normal frequency, color pale yellow
- **Perspiration:** Sweats moderately, mostly during physical activity
- Sleep: Sound sleep, 6-7 hours/night, occasionally disturbed due to stress
- Dreams: Vivid dreams related to work and social situations

Examination

- General appearance: Well-built, alert, cooperative, mildly anxious about appearance
- **Vital signs:** Pulse normal, regular; BP normal; Temperature afebrile; Respiration normal
- **Scalp:** Multiple cicatricial patches with reduced hair density; scalp appears dry and shiny; no signs of active inflammation or infection
- Hair: Hair fall observed as 1-2 hairs per pull test; hair shafts normal in texture; new growth noticed in some areas
- **Skin:** Normal over body; no rashes, lesions, or scaling
- Nails: Normal, no pitting or discoloration
- **Lymph nodes:** No cervical or occipital lymphadenopathy
- **Joints:** Mild pain reported in finger joints; no visible swelling or deformity
- Other systems: Cardiovascular, respiratory, abdominal, and neurological examinations within normal limits

Mental generals

The patient has experienced low self-confidence and emotional discomfort due to long-standing patchy hair fall over 11-12 years. The persistent hair loss affected social interactions initially, making the patient anxious about appearance. Over the course of treatment, as hair fall stabilized and new growth was noticed, the patient reported feeling more confident and began enjoying social gatherings. The patient's mood and mental state are closely linked to the progress of hair fall, and occasional anxiety was noted regarding hair health and appearance. Memory, concentration, and general disposition were not reported as affected.

Past history

The patient had experienced viral fevers 2-3 times in the past. No other significant past medical conditions or addictions were reported.

Family history

No significant family history of hair loss, skin disorders, or systemic illnesses was reported.

Case analysis

Reportorial totality

- Mind Depressed, despondent, low-spirited
- Mind Fear, of disease, of health, of future
- Mind Anxiety about appearance
- Mind Despair, of recovery
- Mind Sensitive to others' remarks
- Hair Falling out, patchy
- Hair Falling out, with itching of scalp
- Hair Falling out, scaly scalp
- Scalp Dry, shiny
- Scalp Cicatricial patches

Repertory screenshot

1 0 0 0									
Remedy Name	syph	Tab	Tub	Camri	coff	Natar	Still	Am.m	NO
Totality	5	5	5	5	5	5	5	4) \Box
Symptom Covered	3	3	3	2	2	2	2	3	
[C] [Head]Hair:Affections of:Baldness:Patches, in:) \Box
[C] [Mind]Anxiety:	1	2	1	3	2	3		1) \Box
[BR] [Mind]Mood, disposition:Melancholic, despondent, depressed, low-spirite		2	3				2	2) \Box
[C] [Mind]Despair:	1	1	1	2	3	2		1) \Box
[C] [Generalities]Syphilis:	3						3	\Box) \Box

Selection of remedy

1. Constitutional remedy

- Remedy name: Syphilinum
- Remedy potency: 200
- Remedy reasons
- Long-standing, deep-seated chronic hair fall
- Cicatricial patches on scalp
- Dry, shiny scalp with mild itching
- Emotional impact: low self-confidence, anxiety related to appearance
- Slow response to previous treatments, indicating syphilitic miasmatic tendency

2. Specific remedy

- **Remedy name:** FL-AC 30
- Remedy potency: 30
- Remedy reasons
- For any acute exacerbation or sudden increase in hair fall

3. Adjunct/biochemic/local tissue remedy

- Remedy name: Calcarea Fluorica (Calc. Flour.)
- Remedy potency: 6X (Biochemic)
- Remedy reasons

- To support hair strength and improve tissue elasticity
- For local improvement in scalp and hair structure

4. Local application/MT (Q) Remedy name: JAB MT (Q)

Remedy reasons

Local supportive therapy for hair growth and scalp nourishment

Symptoms vs miasmatic predominance

Symptom category	Psora	Sycosis	Syphilis	Tubercular
Hair: Bald patches	+	±	+++	±
Anxiety / Mental	++	±	++	±
Mood / Despondency	++	±	++	±
Chronicity / Scarring	+	±	+++	±

Miasmatic predominance

Syphilitic - The chronic, deep-seated hair fall with cicatricial patches, slow improvement, and mental/emotional involvement strongly indicate syphilitic

miasmatic tendency.

Materials and Methods

Kent repertory was used for repertorization

Results

Month	Progress	Prescription			
Feb 2024		Syphilinum 200C - 2 globules, 2/2 per week			
	Hair fall stable; scalp clear; cicatricial patches noted	FL-AC 30C - 2 globules, 2/1 days			
	rian ran stable, scarp clear, cicatriciai patches noted	JAB MT (Q) LA - 4/1 per week			
		Calc. Phos 6X - 2/2 days			
Mar 2024	Hair fall stable; mild improvement in scalp texture	Same as Feb			
Apr 2024	Hair fall slightly reduced; scalp less dry	Same as Feb			
May 2024	Hair fall stable; patient notices slight new growth	Same as Feb			
Jun 2024	Hair fall 1-2 hairs/pull; scalp clear; patient mood improved	Same as Feb			
Jul 2024	Hair fall stable; cicatricial patches persist; emotional confidence improving	Same as Feb			
Aug 2024	Hair fall stable; scalp clear; patient following diet; sleep good	Same as Feb			
Sep 2024	Hair fall stable; scalp clear; Xogen therapy started	Same as Feb			
Oct 2024	Hair fall stable; taking Xogen sessions; diet followed	Same as Feb			
Nov 2024	Hair fall reduced intensity; new growth noticed; mild finger joint pain	Same as Feb			
Dec 2024	Hair fall intensity reduced; patient reports visible hair density improvement	Same as Feb			
Jan 2025	Hair fall stable; scalp clear; patient feels confident	Same as Feb			
		Syphilinum 200C - 2 globules, 2/2 per week			
Feb-Aug 2025	Hair fall stable; patient continues to maintain new growth and density;	FL-AC 30C - 2 globules, 2/1 days			
	emotional confidence maintained	JAB MT (Q) LA - 4/1 per week			
		Calc. Phos 6X - 2/2 days			

Discussion

The patient presented with a long-standing history of patchy hair fall spanning 11-12 years, with multiple cicatricial patches on a dry and shiny scalp. Despite previous allopathic treatments, the hair loss persisted, significantly affecting the patient's self-confidence and social interactions. Mild itching was occasionally reported, along with intermittent viral fevers and mild finger joint pain. Emotionally, the patient experienced anxiety and low selfesteem due to appearance-related concerns. On physical examination, the scalp showed multiple cicatricial patches, reduced hair density, and a dry shiny texture. Mental generals revealed low confidence and worry about hair appearance, though memory and concentration were unaffected. Past history was significant only for occasional viral fevers, and family history was non-contributory. Repertorization using Kent's Repertory highlighted rubrics such as Hair: Baldness: Patches, Scalp: Dry, shiny, Mind: Anxiety, Despair, Melancholic disposition, and Generalities: Syphilis - Miasmatic approach, confirming a syphilitic miasmatic predominance. The totality of physical and mental symptoms indicated Syphilinum 200C as the constitutional remedy, supported by acute flares with FL-

AC 30C, local therapy JAB MT (Q) LA, and tissue support with Calcarea Fluorica 6X. Treatment was administered consistently with monthly follow-ups. The patient showed gradual improvement in hair fall intensity, scalp condition, and hair density. Emotional confidence improved in parallel with visible physical improvement. Chronic cicatricial patches remained, but the patient reported stable hair growth, reduced shedding, and enhanced social comfort over time.

Conclusion

This case illustrates the successful management of long-standing, chronic, patchy hair loss with cicatricial changes using individualized homeopathic treatment based on constitutional and miasmatic principles. Syphilinum 200C addressed the deep-seated chronicity and emotional component, while adjunct remedies and therapies supported local tissue health and acute management. Over a year of follow-up, the patient achieved stabilization of hair fall, new hair growth, improved hair density, and restored self-confidence, highlighting the efficacy of a holistic, individualized homeopathic approach in managing chronic hair disorders.

The transformation





REMARKS:

3 had Kain Problem

Science Long time and 9 doveloped

Patch in my Scalp and now

My Hairs are much Better

and I have new Kain Growth

also.

Thank you Dr Mashan

Jon the teeatment.

Acknowledgments

I take this opportunity to thank those who have helped and supported me personally and professionally during this case study.

References

1. James WD, Berger TG, Elston DM. Andrews' Diseases

- of the Skin: Clinical Dermatology. 14th Edition. Elsevier; 2020.
- 2. Batra R. Homeopathic Management of Hair Disorders. Dr. Batra's Publications; 2018.
- 3. Kent JT. Repertory of the Homeopathic Materia Medica. B. Jain Publishers; 2005.
- 4. Sankaran R. The Spirit of Homeopathy. B. Jain Publishers; 1996.
- 5. Messenger AG, Sinclair RD. Follicular disorders of the scalp. Lancet. 2006;367:1529-1539.
- 6. Al-Mutairi N, Elkashlan M. Alopecia: Pathogenesis and Therapeutic Approaches. Journal of Dermatology & Dermatologic Surgery. 2017;21(1):1-9.
- 7. Indian Journal of Dermatology, Venereology, and Leprology. Clinical guidelines for the management of alopecia. 2019;85(4):367-377.

How to Cite This Article

Qureshi M. Syphilinum in the management of cicatricial alopecia: A clinical case study. International Journal of Homoeopathic Sciences 2025; 9(4): 691-694.

Creative Commons (CC) License

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 International (CC BY-NC-SA 4.0) License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.