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## Efficacy of individualized homoeopathic medicine in psoriasis- a case report

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#### **Abstract**

A widespread and long-lasting skin disorder, Psoriasis tends to recur periodically. Traditional treatments options for psoriasis includes topical creams, occlusion techniques, corticosteroids, systemic medications such as biologics and light therapy. However, homoeopathy may offer a more effective response for this skin condition. A patient of age 25 years who was a female reported in the OPD, primarily complaining of widespread itching and significant skin scaling that had persisted for two years. After experiencing ineffective treatments from other medical systems, she sought homeopathic care. Following a comprehensive case evaluation and repertorization, she was administered Arsenicum album 200 and Rubrum 200. Over a period of 5-6 months, during regular follow-up appointments, the patient exhibited significant improvement, and she continued to show progress in subsequent visits, ultimately becoming free from the condition.

Keywords: Psoriasis, Homoeopathy, Arsenicum album, Autoimmune

Psoriasis is a widespread inflammatory condition driven by immune system dysfunction. It is characterized by skin inflammation, excessive growth of the epidermis, and a heightened risk of developing both painful, damaging arthritis and cardiovascular complications, Individuals with psoriasis also often face significant psychosocial difficulties. Although the disease imposes a considerable health and economic burden, its exact cause is still unknown [1]. Psoriasis ranks among the most prevalent skin disorders, affecting up to 2% of the global population. It is an immune-mediated condition that typically presents with red, well-defined papules and rounded plaques covered in a silvery, scale-like coating. These lesions can be itchy to varying degrees. Psoriatic lesions often appear at sites of skin trauma—a response known as the Koebner or isomorphic phenomenon. Moreover, various outside factors—like illnesses, emotional strain, and specific drugs (such as mood stabilizers, heart-rate regulators, and medications used to treat malaria)—can aggravate the disorder [2].

#### Homoeopathy and Psoriasis

Homeopathy has recently gained recognition for its benefits, such as affordability and lack of side effects. It focuses on treating the patient's physical symptoms rather than the disease itself, effectively eliminating rashes. Research has shown that homeopathy can successfully manage psoriasis and may not require ongoing maintenance [3].

#### Case report

A patient of age 25 years who was a female reported in the OPD on date 15/1/2024 with complaint of itching all over the body, especially on legs with scaling of skin with cracks since 4 years. Her condition got worse by cold air, at morning, during sleep and especially in winters and better by warm application.

No other major complaints were reported by the patient.

#### Present complaint of patient

This case was a known case of Psoriasis. The patient had consumed numerous allopathic medicines, steroids and used ointments for relief but there wasn't any improvement in her condition. Initially there were scattered psoriatic patches on the lower part of her leg (left) but soon her skin on whole of her leg was occupied by the patches. This was accompanied by

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extreme itching with scaling and infrequent bleeding.

#### Past history

History of Malaria- at age 12 years History of Chickenpox- at age 5 years

#### **Family History**

Mother-History of Eczema Father- History of Diabetes

#### **Menstrual History**

Menarche age - 12years Regular menses

#### **Personal History**

Her appetite was decreased due to itching of skin. She only had one chapati per meal. She was taking 3 meals per day. Thirst was normal. She desire for pungent foods. Her sleep was disturbed due to intense itching.

#### Mental general

She was emotional. She was very fastidious, wanted everything to be in proper place, neat and clean. She was mentally restless. She was having anxiety about disease. She became irritable due to itching of skin Thermally patient was chilly.

#### **Diagnostic Assessment**

A diagnosis of psoriatic plaques was made, based on the characteristic presentation of red patches covered with

silvery-white scales [4].

#### **Local examination**

Scaly patches on legs. Red silvery in color. Eruption was hot to touch.

#### Case Analysis

After reviewing the symptoms, the key mental, physical, and specific signs were considered to form the overall picture of the case and following symptoms were converted into rubrics

Table 1: Case Analysis

Symptoms	Rubrics	
Irritable	Mind – Contrary	
Anxiety about disease	Mind -Anxiety disease about	
Fastidious	Mind -Fastidious; Appearance, about; Personal	
Mentally restless	Mind -Mood, disposition; Restless	
Scaly eruption on legs	Extremities -Eruptions; Scaly; Legs	
Itching, burning followed	ching, burning followed Skin-Burning, Pricking, burning,	
by scratching	itching, better by scratching	
Desire pungent	Stomach- Desires; Pungent things	

The symptoms were evaluated miasmatically using Dr. Samuel Hahnemann's theory on chronic diseases, which indicated the predominance of the psoric miasm <sup>[5]</sup>. Based on the symptoms mentioned above, a systematic repertorization was carried out by utilizing *Zomeo* application <sup>[6]</sup>. The Repertory chart is given below.



Fig 1: Repertorization of the case

The patient was prescribed Arsenicum Album 200C <sup>[7, 8]</sup> TDS for 3 days and subsequently Rubrum 200 BD for a duration of 15 days on 1s visit (15/01/2024) after

considering the totality of repertory and background of miasm. There was a symptomatic improvement in the patient

Table 2: Details of Follow-up

Date of Follow up	Symptoms	Medicine and Dose
30/1/2024	Scaly eruptions on legs not improved. Itching on legs is slightly lesser. Disturbed sleep	Rx Rubrum 200 BD (1 month)
28/2/2024	Itching on legs is better and scaling is also improved.	Rx Rubrum 200 BD (1 month)
25/3/2024	Scaly eruptions remarkably improved. Itching reduced and patient can sleep better	Rx Rubrum 200 BD(1 month)
20/4/2024	All general complaints are better. No itching at night. Scaling is reduced	Rx Rubrum 200 BD (1 month)
18/5/2024	No night aggravation in complaints. All the complaints like itching, burning, scaling are reduced, patient now has a sound sleep at night	Rx Rubrum 200 BD (1 month)

#### Pre-treatment PASI score (15/1/2024) [9]

Characteristics of Plaque		Legs
A	Erythema	4
В	Induration/Thickness	3
С	Scaling	3
	Lesion score sum(I=A+B+C)	10
	Area Score(II)	3
	Body Surface Area(III)	0.4
	Totals(I*II*III)	12

## Post-treatment PASI score (18/5/2024) [9]

	Characteristics of Plaque	Legs
A	Erythema	1
В	Induration/Thickness	1
C	Scaling	1
	Lesion score sum(I=A+B+C)	3
	Area Score(II)	1
	Body Surface Area(III)	0.4
	Totals(I*II*III)	1.2

#### Outcomes and Follow up

A detailed follow-up of the case is represented in Table 2. In the present case, no new patches of previous lesions were seen to occur. The changes in the psoriatic lesions before and after treatment have been explained in the figures (2) and (3).

#### **Discussion**

The philosophy of Homoeopathy is based on individualization and symptom similarity. Homoeopathic case taking helps in understanding the individuality of the patient. Based on the totality of symptoms Arsenicum Album was given in 200C potency. The repetition of doses was based on the susceptibility of the patient. The case improvement was taken for 6 months. The patient was kept on Placebo to allow the curative reaction to go on further repetition of doses.



Fig 2: Pre-Treatment



Fig 3: Post-Treatment

#### Conclusion

This case report demonstrates the successful application of a holistic homeopathic approach for managing psoriasis. The effective treatment stemmed from a thorough understanding of the homeopathic medicine's mechanism and its depth of action, guided by principles from homeopathic pharmacy and the Organon of Medicine. This comprehensive approach to the case resulted in proper treatment of a typically obstinate psoriasis case.

#### **Conflict of Interest**

Not available

## **Financial Support**

Not available

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

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