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## Effectiveness of individualised homoeopathic medicine in the treatment of psoriasis - A case report

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#### Abstract

Psoriasis is a long-standing inflammatory skin condition that adversely affects both physical health and emotional well-being. This case report documents the outcome of individualized homoeopathic management in a 15-year-old boy diagnosed with chronic plaque psoriasis. The patient presented with widespread scaly lesions accompanied by itching and burning, along with a recurrent disease pattern and psychological distress. Following detailed case analysis, *Veratrum album* 200 was prescribed. Subsequent follow-ups showed significant improvement, with complete clearance of lesions and no recurrence. This case suggests the usefulness of individualized homoeopathy in psoriasis management.

**Keywords:** Psoriasis, chronic plaque psoriasis, individualized homoeopathic treatment, veratrum album

#### Introduction

Psoriasis is a chronic, immune-mediated inflammatory skin disease that significantly impairs quality of life worldwide. Derived from the Greek word Psora, meaning "itch," psoriasis has been recognized for centuries, with Robert William historically credited for classifying it as a distinct clinical condition then termed Williams lepra. Initially thought to be limited to the skin, psoriasis is now understood as a systemic disorder with multisystem involvement, often associated with comorbidities such as psoriatic arthritis, metabolic syndrome, cardiovascular disease, and psychological conditions<sup>[1, 2]</sup>.

The most prevalent form, chronic plaque psoriasis, is characterized by well-defined, erythematous, scaly plaques predominantly affecting the scalp, extensor surfaces, and sacral region. Clinical features such as the Auspitz sign and Koebner phenomenon are hallmark indicators, and the disease typically follows a relapsing-remitting course, contributing to substantial physical, emotional, and economic burdens<sup>[1, 2]</sup>.

#### Aetiology

The aetiology is multifactorial, involving genetic, immunological, and environmental factors. Approximately 30–50% of patients report a family history, and genes like HLA-Cw6, IL-23R, and TNFAIP3 are commonly implicated. Immunologically, hyper activation of Th1, Th17, and Th22 cells leads to keratinocyte proliferation through inflammatory cytokines including TNF- $\alpha$ , IL-17, and IL-23. Environmental triggers such as infections, trauma, certain medications, smoking, alcohol, and stress may initiate or exacerbate the disease. Globally, psoriasis prevalence ranges from 0.1% to 3%, with regional and ethnic variability<sup>[3]</sup>.

#### Clinical features

Psoriasis is characterized by the development of erythematous, well-defined, dry scaly papules, and plaques of sizes ranging from a pinhead to palm-sized or larger. The scales are abundant, loose, dry and silvery white or micaceous. On skin scraping, capillaries at the tips of elongated papillae are torn, leading to multiple bleeding points (Auspitz sign).

#### Psoriasis: Key diagnostic points

1. Erythematous scaly plaques
2. Well-defined border

3. Scales are dry, loose, and micaceous
4. Koebner phenomenon seen
5. Auspitz sign positive
6. Regular, circular pits on the nail plate
7. Involvement of the distal interphalangeal joints of fingers and toes <sup>[4]</sup>

#### Diagnosis and differential diagnosis <sup>[5]</sup>

Psoriasis is diagnosed by the characteristic clinical findings; however, a biopsy may be conducted for differential diagnosis. In pustular psoriasis, the pustules are sterile.

The diagnostic criteria to differentiate other diseases are

- 1) Seborrheic dermatitis: The clinical findings resemble those of psoriasis, but the affected sites are relatively localized at seborrheic areas.
- 2) Chronic eczema, nummular eczema: Various localized skin lesions including erythema, scales, papules, and blisters. Intense itching. The lesions are less clearly margined than in psoriasis.
- 3) Para psoriasis Pigmentation and atrophy are often present, and mild scaling occurs.
- 4) Pityriasis rosea (Gibert) Psoriasis-like lesions appear after manifestation of the first eruption, and disappear in 1 or 2 months.

#### Homoeopathy perspective

Treating the Sick Person, Not the Disease Aphorism 1: "The physician's high and only mission is to restore the sick to health, to cure, as it is termed."<sup>(6)</sup> (Hahnemann, Organon of Medicine). In homeopathy, we treat sick people, not the disease condition. The goal of other systems of medicine is to decrease skin irritation by topical, systemic, and phototherapy treatments. Homeopathy, on the other hand, tackles the ill person rather than just the skin and investigates each person's unique response.

#### Case report

##### Preliminary data

**Name:** Master ABC

**Age:** 15yrs

**Sex:** Male

**Education:** 8<sup>th</sup> standard

**Address:** Penjerla

**Occupation:** Student

**Registration Id:** 390772

**Date of case taking:** 27-02-2024

##### Chief complaints

Patient came with the complaints of white scaly eruptions all over the body since 3months

##### History of presenting complaint

Patient was apparently healthy 3 months back, gradually developed scales over right leg and then spreaded to the entire body, with itching and burning which get aggravated at night and eating non veg, want to scratch but doesn't give relief

##### Past history

Had H/o same complaint 6 years back and used Ayurvedic treatment

##### Family history

**Father:** Apparently healthy

**Mother:** Healthy

**Brother:** Elder brother has eczema

##### Physical generals

**App:** 3 times /day, satisfactory

**Thirst:** Thirstless

**Desires:** Nonveg

**Disagrees:** Non veg increases-causes itching of skin

**Urine:** Clear, no burning

**Stool:** 1 time /day, regular, no complaints

**Perspiration:** Scalp (on exertion)

**Sun agg:** Nothing specific

##### Thermals

**Weather preference:** Winter

**Fan:** Always

**Covering:** Doesn't required

**Conclusion:** Hot patient

**Sleep:** Refreshed,

**Dreams:** Of dead people and they are attacking him.

##### Life space investigation

Patient was born and brought up in a middle-class family and he is the 3<sup>rd</sup> child, he got a similar episode during his childhood when he was at the age of 8 years and got better by using Ayurveda medicine. He was isolated by his friends in school because of those eruptions and they used to make him sit separately. He fears that it will happen again because he got the eruptions.

Has Fear of dead people (+3) fears they will come and kill him has fear that someone is coming from behind, fear that robbers may come and will beat him and will take money from him.

Fear of dark, can't stay alone (+2), wants someone company If anyone insult him he gets anger and he beats them. Same incident happened when he was in hostel where one of his teacher used to beat him unnecessarily he used to get anger and one day he fought with him also.

His aim is to become a police.

##### Mentals

Fear of being alone

Fear of persecuted

Forsaken feeling

##### General physical examination

**General appearance:** White complexion

**Built:** Well built

**Nourishment:** Well nourished

**Temp:** Afebrile,

**Weight:** 41kg

**Skin:** White scales

**Nails:** Non brittle, conjunctiva -pink

No pallor, icterus, clubbing, cyanosis, edema

Bp-100/80mmhg, pulse -78/min

##### Systemic examination

###### Respiratory system

Normal Vesicular Breath Sounds Heard

###### Cardiovascular system

S1, S2 sounds head, No added sounds

###### Skin examination

Dry scaly eruptions all over the body

Auspitz sign +ve

##### Provisional diagnosis

Plaque psoriasis

## Reportorial totality

Totality, Rubrics, None, Chart		Rubrics Count																		
		puls	droz	stram	merc	nat-c	verat	calc	hell	ars	chin	lyc	camph	hyos	lach	psor	sep	carb-v	arist-cl	manc
Grade Total	4	4	4	4	4	4	4	4	3	3	3	3	3	3	3	3	3	3	3	
1 Complete; Mind; FEAR alone, of being	8	7	7	6	6	6	5	5	7	7	6	6	6	6	6	6	5	4	4	
2 Complete; Mind; DELUSIONS, persecuted, that he is	2	1	2	1	1	1	1	1	1	3	3	2	3	1	2	1	2	1	2	
3 Combined; Mind; FORSAKEN, FEELING	1	3	1	1	1	1	1	1	1	3	1	1	2	3	1	1	1	1	1	
4 Combined; Perspiration; COLD	3	1	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	2	2	2	2	2	3	2	2	3	3	3	3	3	2	2	3	3	3	1	

## Prescription

Veratrum album 200 - 1 dose

Sac lac BD / 1 month

## Follow-up

26-3-2024	Eruptions over scalp –slightly reduced Eruptions over body –reduced Scaling decreased, itching slightly better, no bleeding,	Rx: 1) Sac lac 200 -1 dose /stat 2) Sac lac Bd- 6-0-6 / 21 days
30-4-2024	Complaints reduced by 80% by previous rx, scaly eruptions on left arm and left leg slightly present and on right ear. Itching decreased, scaling decreased, no bleeding or pus discharge, Generals are good	Rx: 1) Sac lac 200 /1 dose /stat 2) Sac lac Bd -6-0-6 /21 days
21-5-2024	Eruptions reused completely. No new complaints. Eruptions on leg also reduced	Rx: 1) Sac lac 200 - 1 dose /stat 2) Sac lac 6-6 Bd/3 weeks
15-6-2024	Eruptions reduced completely. No new complaints Generals are good	Rx: 1) Sac lac 200 - 1 dose stat 2) Sac lac bd 6-0-6 bd /3 weeks
23-8-2024	No new complaints, eruptions reduced completely, only discolouration is present at leg	Rx: 1) Sac lac 200 - 1 dose 2) Sac lac bd 6-0-6 bd /3 weeks

## Before



**After****Discussion**

Psoriasis is a chronic inflammatory dermatosis with a relapsing course and significant psychosocial impact. Conventional treatments mainly provide symptomatic relief and are often associated with recurrence after discontinuation. Homoeopathy, through an individualized and holistic approach, aims to restore health by addressing the disturbed vital force rather than suppressing local pathology.

In this case, a 15-year-old boy with chronic plaque psoriasis presented with classical cutaneous features along with prominent mental symptoms such as fear of being alone, fear of persecution, anxiety, and anger following insult. These psychological factors were considered important in case analysis and remedy selection. *Veratrum album* was prescribed based on the totality of symptoms, including mental state, thermal reaction, modalities, and general characteristics.

Following the administration of *Veratrum album* 200, the patient showed gradual and sustained improvement. There was a marked reduction in scaling, itching, and burning, leading to complete clearance of lesions without recurrence during follow-up. The improvement in general well-being along with cutaneous recovery supports the role of individualized homoeopathic treatment in chronic skin diseases.

**Conclusion**

This case illustrates the potential effectiveness of individualized homoeopathic management in chronic plaque psoriasis. A holistic prescription based on the totality of symptoms resulted in complete remission without relapse. Although conclusions cannot be generalized from a single case, the outcome suggests that individualized homoeopathy may be a useful therapeutic option in the long-term management of psoriasis.

**Conflict of interest**

No

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