



International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493

P-ISSN: 2616-4485

www.homoeopathicjournal.com

IJHS 2020; 4(4): 83-85

Received: 21-07-2020

Accepted: 26-08-2020

Dr. Rajeev Saxena

Professor, M.D.(Hom.), HoD,
PG Ph.D., Guide, Department
of Repertory, Swasthya
Kalyan Homoeopathic Medical
College & Research Centre,
Sitapura, Jaipur, Rajasthan,
India

Dr. Indra Gaurav Saxena

M.D. (PGR), Department of
Repertory, Swasthya Kalyan
Homoeopathic Medical College
& Research Centre, Sitapura,
Jaipur, Rajasthan, India

Dr. Purnima Sharma

M.D. (PGR), Department of
Repertory, Swasthya Kalyan
Homoeopathic Medical College
& Research Centre, Sitapura,
Jaipur, Rajasthan, India

Corresponding Author:

Dr. Rajeev Saxena

Professor, M.D.(Hom.), HoD,
PG Ph.D., Guide, Department
of Repertory, Swasthya
Kalyan Homoeopathic Medical
College & Research Centre,
Sitapura, Jaipur, Rajasthan,
India

Urticaria with homoeopathic management

Dr. Rajeev Saxena, Dr. Indra Gaurav Saxena and Dr. Purnima Sharma

Abstract

Urticaria ("hives or nettle rash") is a condition which triggered from outside the body. Urticaria is pruritic, edematous, erythematous, blanching papules that are round or oval, pale raised centers (wheals) on the skin, which may sometimes be associated with inflammation and allergy. The longer duration of modern therapy in urticaria may cause some side effects. Homeopathy is suitable for the management & treatment of urticaria, which can provide permanent & satisfactory results. In Homeopathy, treat the patient according to "law of similar," with key of Homoeopathy "individualization". Thus, similar diagnoses are can be treated with different Homoeopathic medicines. The aim of the article focuses on the causes, types, symptoms, and treatment of urticaria by homeopathic medicines.

Keywords: Urticaria, hives, nettle rash, homoeopathy, remedy, homoeopathic therapeutics

1. Introduction

Urticaria, first delineate by Hippocrates ^[1], is perennial presenting complaints in a disease of the skin with a lifetime prevalence of 8.8% & chronic Hives was 1.8% ^[2].

It is a disease characterized by the development of wheals (hives), angioedema, or both. In giant urticaria, the wheels are huge & involve the subcutaneous tissue producing from circumscribed swellings ^[3]. urticaria occurs in two forms – acute & chronic. An acute attack may-be starts with mild gastrointestinal or other constitutional symptoms & fever and may last for a few hours or several days. Chronic forms of urticaria rarely present constitutional symptoms ^[3]. Urticaria becomes chronic when wheals vary daily or almost daily for six weeks or more ^[4], illustrate as episodic or may recur at short intervals, occasionally at the same hour each day, for months & years ^[3]. around 20% of the population suffers from this condition once in their lifetime ^[5]. Common in young adults (female > male) ^[3]. In children, frequently associated with infection ^[6]. Manifestations of urticaria/angioedema are present in fever, headache, dizziness, feeling like a lump in the throat, shortness of breath, hoarseness, wheezing, abdominal pain, nausea, vomiting, diarrhoea, & arthralgia's ^[7].

Applying the vital principles of homeopathy and a holistic approach to skin diseases should not be considered local maladies. These diseases are result from the internal derangement of vital-force (disharmony). The use of external application on the skin should be strictly avoided. Internal medicine helps in the establishment of vital force and provides complete relief.

Homeopathy ranks the most popular among the traditional, alternative medicines. In Homeopathy, treat the patient according to "law of similar," with key of Homoeopathy "individualization". Thus, similar diagnoses are can be treated with different Homoeopathic medicines.

2.1. Definition

Numerous things can cause Urticaria (hives). Urticaria was a kinship to the rash caused by a nettle, a plant of the genus *Urtica*, named in the 18th century. It arises from the Latin word *urtica*, *urtica* means "nettle". "Nettle" is also related to the Latin verb *urere*, *urere* means "to burn." ^[8]. Urticaria is a common, transient, and usually recurrent skin disorder, showing the sudden appearance of wheals pale oedematous plaques with erythematous borders ^[9].

Urticaria involves only the outermost portion of the dermis, presenting as well-circumscribed raised serpiginous borders with blanched centers that may merge to become giant wheals ^[10].

2.2. Classification

Urticaria is often classified by duration, acute and chronic, with a time division chosen at six weeks to three months.

2.2.1. Acute: When the tendency to wheals format is present for less than six weeks, urticaria is termed acute.

2.2.2. Chronic: Wheals most days continue for more than six weeks; it is classified as chronic. If the episodes are of shorter duration than the symptom-free period, then recurrent urticaria is considered ^[11].

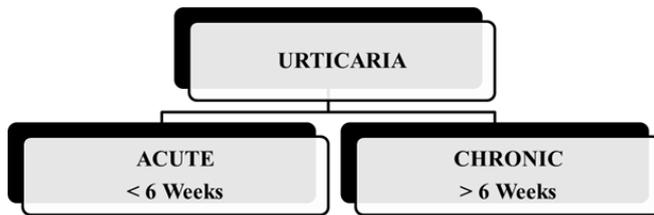


Fig 1: Classification Based on Duration

2.3. Etiology ^[7, 12].

- a. **Drugs:** Penicillin and Other Antibiotics, Aspirin, NSAIDs, Codeine, Morphine, Quinine.
- b. **Food additives:** Tartrazine, Hydroxybenzoates, Sulphites, Salicylates
- c. **Foods:** Milk and Milk Products, Eggs, Nuts, Chocolates, Tomato, Pork, Yeast, Strawberries, Shellfish.
- d. **Inhalants:** Grass Pollens, Mould Spores, Animal Danders, House Dust.
- e. **Systemic Disorders:** SLE, Autoimmune Thyroid Disorders.
- f. **Infections**
- g. **Psychogenic**
- h. **Physical:** Friction, Pressure, Cold, Vibration, Sweating, Sun Exposure.
- i. **Idiopathic:** Chronic spontaneous urticaria.

2.4. Histopathology ^[7].

Urticarial lesions show vascular dilatation, dermal edema, and the presence of cells (lymphocytes, polymorphs, basophils, and eosinophils) in the dermis. In angioedema, the same process occurs in the deep dermis, subcutaneous and submucous regions.

2.5. Pathogenesis ^[7].

Urticaria usually represents an immediate type-1 of hypersensitivity reaction.

Local release of histamine from the granules of mast cells and basophils causes capillary and arteriolar dilatation and increased vascular permeability via H1 and H2 receptors on blood vessels.

2.6. Clinical Feature ^[9].

- Intence Itching: Stinging and Burning Sensations.
- Manifestation of Urticaria:
 - Transient
 - Elevated
 - Erythematous or pale papules
 - Plaques
 - Linear streaks
 - Generally surrounded by a halo or flare
 - Edematous lesions (Wheals)
- Size: lesions vary in size from few Millimeters to several Centimeters.

- Triggering factor:
- Emotions
- Heat
- Exercise
- Change in temperature

2.7. Investigations ^[7, 12].

Establishing the cause of urticaria is difficult. In about 70% of cases, no clear-cut reason can be detected.

The following may be appropriate:

- Full blood count.
- Erythrocyte sedimentation rate (ESR).
- Urea and Electrolytes, Thyroid and LFT, Iron Studies.
- Total IgE and Specific IgE to Possible Allergens.
- Antinuclear Factor.

3. Homoeopathic Management

1. **Apis Mellifica:** Incompletely formed and recurrence of suppressed urticaria comes under this medicine. Symptoms worse, especially in a closed or warm room. There is a great burning sensation after itching, and the area becomes very sensitive to touch ^[14].
2. **Aconitum Napellus:** The main features of aconite are the acute, sudden, and violent appearance of symptoms, including fever. Skin appears red, hot, dry with a burning sensation. Rashes are especially measles-like. The patient cannot tolerate music because it makes him sad. Urticaria becomes worse when the patient is rising from bed ^[14, 15].
3. **Antimonium Crudum:** scaling skin, which is rough and horny spots found in this medicine. An eruption mainly comes in the evening, chiefly on limbs, chest, back, and neck region. Itching of eruptions occurs, especially by the heat of the bed. In this medicine, characteristics of urticaria are white urticaria with a red circumference. The patient dislikes bathing from cold water ^[13, 14].
4. **Arsenicum Album:** The appearance of the skin is parchment-like and dry with cold sweat & fire like burning sensation on the affected part. Symptoms are worse at midnight and after midnight ^[13, 14].
5. **Calcarea Carbonica:** Skin of Calcarea carb is very flabby. The clear shuddering of the skin, along with loss of balance or vertigo, is well marked in this medicine. Most commonly, nettle rash is found, which gets better in cold air. Small wounds do not heal easily, and it takes time to heal ^[13, 15].
6. **Copaiva Officinalis:** Large and red-colored patches all over the body, which is associated with constipation and fever, are mainly found in this medicine. The shape of the patches is lenticular, along with itching. Chronic urticaria of children chiefly comes under this medicine ^[13, 15].
7. **Dulcamara:** There are many varieties of rashes found in this medicine, especially humid, pale, scaly, which oozes after scratching. The main indication of dulcamara is that symptoms get worse in cold and damp weather. The patient is susceptible to cold because that whenever the patient takes a cold or is exposure to cold for a long time, eruptions of urticaria appears on the skin ^[13, 14].
8. **Natrium Muriaticum:** Eruptions appear, especially in the bends of limbs, a margin of the scalp, and behind the ears. These eruptions are mainly of crusty type-any

exertion worse the itching. The patient found Great weakness and tiredness. The condition of hangnails is very marked in this medicine. Around the nails, the skin is dry and cracked^[14, 15].

9. **Rhus Toxicodendron:** In the case of urticaria, the skin is red, swollen along with extreme itching. Extreme fear of dying by poisoning, especially at night found in the patients. The patient cannot remain in one position due to restlessness. Getting wet after being overheated has very harmful effects^[14, 15].
10. **Sulphur:** In the case of urticaria, skin becomes dry and scaly, were itching with a great burning sensation, which worse after scratching and washing. If the patient has any kind of skin affections after local medication, so the sulphur has great results in these types of cases. The patient does not like to be wash/bath^[14, 15].
11. **Urtica Urens:** A characteristic feature of Urtica in the case of urticaria is violent itching and burning with a tingling sensation. The returning of symptoms occurs at the same time every year^[15].

4. Conclusion

Homoeopathy offers excellent treatment for urticaria. In a holistic approach to the Homoeopathic system of medicine, skin diseases are not considered local diseases. Treatment of urticaria is not only dependent on a character but also on periods and condition aggravation, generals & particulars considered. Many stalwarts have given direction homoeopathic treatment of urticaria. The above therapeutics medicines are used frequently in urticaria with the best results. Other individualized homoeopathic medicines (Similimum) can also be offer significant result in urticaria.

5. Reference

1. Jeong-Hun Seo and Jae-Woo Kwon, Epidemiology of Urticaria Including Physical Urticaria and Angioedema in Korea, Pubmed. 2019; 34(2):418–425.F, Doi: 10.3904/Kjim.2017.203
2. Zuberbier T, Balke M, Worm M, Edenharter G, Maurer M. Epidemiology of Urticaria: A Representative Cross-Sectional Population Survey. Clin Exp Dermatol. 2010; 35(8):869-73. Doi: 10.1111/J.1365-2230.2010.03840.X. PMID: 20456386.
3. Warner EC, Savill's System of Clinical Medicine, 14th Edition, Arnold-Heinemann, CBS Publisher & Distributors, Delhi, 1964, 958p
4. Yadav S, Bajaj AK. Management of Difficult Urticaria. Indian Journal of Dermatology, 54(3), 275–279. <https://doi.org/10.4103/0019-5154.55641>
5. Sachdeva S, Gupta V, Amin SS, Tahseen M. Chronic Urticaria. Indian J Dermatol. 2011; 56(6):622-8. DOI: 10.4103/0019-5154.91817. PMID: 22345759; PMCID: PMC3276885.
6. Shin M, Lee S. Prevalence and Causes of Childhood Urticaria. Allergy, Asthma & Immunology Research. 2017; 9(3):189-190. <https://doi.org/10.4168/aaair.2017.9.3.189>
7. Sainani GS, Abraham, Dastur FD, Abraham P, Dastur FD, Joshi VR *et al.* API. Text Book of Medicine. 6th Edition. Association of Physicians of India Mumbai, 1999. Chapter: Hypersensitivity Disorders by Rg Valia
8. Merriam Webster Dictionary, Available From <https://www.merriam-webster.com/dictionary/urticaria>.
9. Shah SJ, Anand MP, Sainani GS., Mehta A,

- Vishwanathan M, Shah SN, Vr *et al.* API. Text Book of Medicine. 4th Edition. Association of Physicians of India Mumbai, 1986, 1141p.
10. Kasper D, Fauci A, Longo DL, Braunwald E, Hauser SL, Jameson JL *et al.* Harrison's Principles of Internal Medicine. 17th Edition Vol-2. The Mcgraw-Hill Companies, 2008, 1864p
11. Yadav S, Upadhyay A, Bajaj Ak. Chronic Urticaria: An Overview. Indian J Dermatology [Serial Online] 2006 Cited. 2020; 51:171-7. Available From: <http://www.e-ijid.org/text.asp?2006/51/3/171/27978>
12. Walker RB, Colledge RN, Ralston HS, Penman DI. Davidson's Principles and Practice of Medicine. 22 Nd Edition. China: Churchill Livingstone Elsevier;2014. Chapter 28 Skin Disease;1290, 1291p.
13. Clarke JH. A Dictionary of Practical Materia Medica, Vol. 1, B. Jain Publishers (P) Ltd. 121,126179, 350, 594,686, 690p
14. Allen HC. Allen's Key Notes, Rearranged and Classified with Leading Remedies of The Materia Medica And Bowel Nosodes, 10th Edition, B Jain Publisher (P) Ltd, New Delhi. 04, 05, 29, 33-34,43, 44, 127, 214, 259, 296p
15. Boericke W. Boericke's New Manual of Homoeopathic Materia Medica With Repertory, Third Revised & Augmented Edition, 2008, B. Jain Publisher Pvt. Ltd, New Delhi.10, 132, 206,408, 410, 491, 548, 580, 581p.