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Prospective study of homoeopathic management of acne vulgaris in teenagers

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Abstract
Introduction: Acne vulgaris is the common problem seen in teenagers. It also disturbs the person socially and mentally. Like any other chronic disease patients, acne sufferers also look for a RAPID, gentle and permanent solution for their problem. These all requirements exactly fit with the criteria of homoeopathic cure according to Master Hahnemann. Homoeopathic mode of treatment should fulfil all expectations of acne sufferers. The primary aim of the study was to evaluate the usefulness of Homoeopathic mode of treatment in the management of acne vulgaris.
Methods: Total 30 cases of acne vulgaris diagnosed clinically were selected and followed up for treatment outcome.
Results: All the 30 enrolled patients completed the study with relatively higher incidence observed in females. Face and back was the most common pattern of distribution of lesions while papular was the most common presenting type of lesions. Natrum Mur, Sulphur & Silicea were the commonly prescribed medicines based on individualistic approach. 27 (90%) patients had highly significant improvement in total lesion count with homoeopathic treatment (p<0.001).
Conclusion: Homoeopathic mode of treatment in patients suffering from acne vulgaris is effective.

Keywords: Homoeopathy, acne vulgaris, individualistic, teenagers

Introduction
Acne vulgaris is a frequent diagnosis by a physician for eruptions occurring on the face of teenager described as "pimples" by a layperson. Epidemiology also supports this image in lay person's mind, acne vulgaris being a disease of teenage[1]. Estimated global all age prevalence for some skin conditions according to WHO in 2010 were extremely high [2]. Specific prevalence of acne vulgaris was 9.4% which was more than any skin disease except fungal infections & viral warts. Randomly selected 521 patients at clinics and hospitals of general physician and skin specialist in a part of western India showed Acne or pimples (14%), being most common skin disease amongst them [3]. This suggests acne vulgaris is also prevalent among local population & probably more than among the overall world population. Acne vulgaris is predominantly a disease of teenage [1]. At this age, you are likely to find impatience in the majority of sufferers. For the rapid result, they are liable to use external applications encountered in advertisements & easily accessible allopathic treatments. But for obvious reasons, this approach is not able to cure such a chronic disease in a short while & eruptions reappear as soon as they stop their regular use. So secondarily they are in search of a permanent solution. On the other hand, parents are always concerned about side effects of any measure to their tender aged child and for some, cost also matters. Therefore, parents always favor the most harmless approach to treat their child. These all requirements exactly fit with the criteria of homoeopathic cure according to Master Hahnemann and so homoeopathic mode of treatment should fulfill all expectations of acne sufferers.
To treat homoeopathically, selection of similimum is very important. According to principles of homoeopathy remedy should be prescribed on individualistic approach. For this repertorisation is well established reliable way to find out a small group of indicated remedies from thousands of proven homoeopathic medicines. Kent's repertory is one of the most widely used repertories for repertorisation. Synthesis repertory is an enlarged version of the sixth American edition of Kent's Repertory; Synthesis is one of the Repertories which is upgraded from time to time. It is available in both the formats, book as well as computer program named as RADAR. Therefore, the 9th version of Synthesis was used for the purpose of repertorisation in the study.
There is not enough evidence on the usefulness of homoeopathic mode of treatment for the management of acne vulgaris. Therefore the primary aim of this study was to evaluate the

usefulness of Homoeopathic mode of treatment in the management of acne vulgaris.

Materials and Methods

The study was undertaken at Ahmedabad Homoeopathic Medical College and Sainath Hospital after due approval from the Institutional Ethics Committee and patients were enrolled only after taking written informed consent from all the participants. Total 30 patients of acne vulgaris were planned to be enrolled in the study would be prescribed standard homeopathic treatment for acne vulgaris. Case taking & case performa were designed as per principles are given in Organon of medicine by Dr. Hahnemann. Patients from 11 to 17 years of age and of either gender suffering from acne vulgaris who are willing to participate were included while those with facial eruptions other than acne were excluded from the study. Detailed case taking was performed of each case to erect totality of symptoms. Homoeopathic remedy for each case was selected on the basis of repertorisation of the totality of symptoms through synthesis repertory while potency and dosage were according to homoeopathic principles.

Clinical improvement was defined as disappearance or relief of symptoms, improvement in general health and reduction in the frequency of complaints.

Acne intensity score was used for the assessment of effectiveness. Disease intensity score was calculated on the basis of a number of acne lesions seen by naked eye. After completion of treatment, the post-treatment disease intensity scores were compared with the pre-treatment disease intensity scores (baseline) and evaluated statistically using appropriate statistical methods. Improvement in acne was defined as a reduction in a number of acne vulgaris lesions or complete disappearance of lesions, at last, follow up. No improvement was defined as no reduction in a number of lesions or an increase in the number of lesions of acne vulgaris, at last, follow up. Demographic data were analysed using descriptive statistics. The significance of the treatment effect based on different homoeopathic therapeutic strategies was tested by 't' test to assess difference between two groups (before treatment and after treatment).P value <0.05 was considered as significant.

Results

Demographics

Total 30 patients were enrolled in the study and all the patients completed the study, i.e. had at least one post-treatment follow up. The age range of the enrolled patients was from 11-17 years with highest patients (n=12; 39.96%) were aged 17 years. Out of 30 patients studied, 13 patients (43.29%) were male and 17 patients (56.61%) were female. A maximum number of male, 4 patients (13.32%) and also female, 8 patients (26.64%) were at the age of 17 years.

Although patients presented with multiple symptoms and signs, the most common presenting symptom was papular lesions (33.3%) followed by pustular lesion (19.98%).

Table 1: Frequency of lesions as per type

Type of lesions	No. of Patient	Percentage
Comedones	3	9.99%
Papular	10	33.33%
Pustular	6	19.98%
Nodular	5	16.65%
Cystic	1	3.33%
Scar	5	16.65%
Total	30	100%

Though comedones are diagnostic for acne vulgaris & always present in every case of acne vulgaris, this table shows predominant type of eruptions in different cases included in study.

It was observed that face along with back was the most common pattern of distribution with 12 number of patients (39.96%), followed by face alone in 7 (23.31%) patients, face & chest in 5 (16.65%), face with upper arm in 4 (13,32%) and face-back-chest in only 2 (6.66%) patients.

Treatment

Natrum Mur, Sulphur & Silicea were the medicines most frequently prescribed in this study. Each medicine was prescribed to 4 (13.32%) patients. Graphites were prescribed to 3 (9.99%) patients while Arsenic Alb. & Psorinum were prescribed to 2 (6.66%) patients each. Bryonia, Causticum, Ignatia, Lyco, Merc sol, nux vom, Pulsatilla, Sepia, Thuja & veratrum alb were among the other medicines prescribed to the patients.

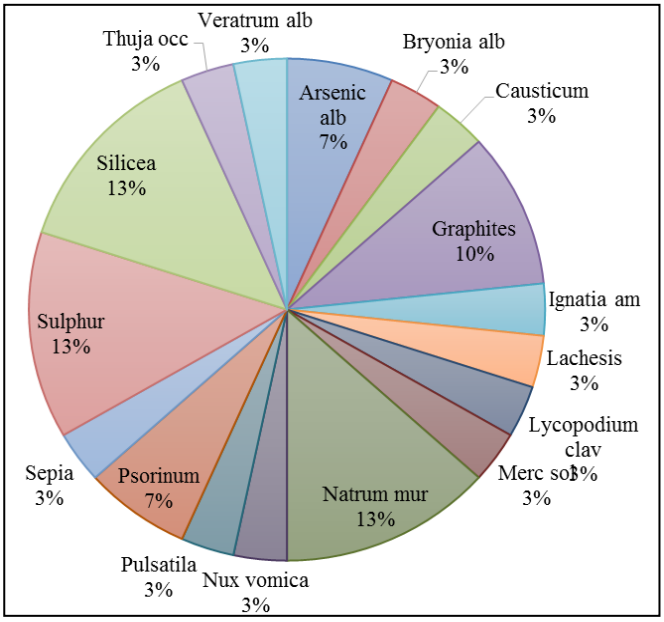

Fig 1: Distribution of cases according to remedies prescribed

Outcome assessment

Out of 30 cases, 27 (90%) cases were improved during the study period with highly significant difference (p<0.001) in total lesion count post-treatment.

Below table shows the lesion count of all the patients at baseline and post-treatment.

Table 2: No. of lesions before and after treatment for each patientss

Patient	Lesion count	
	Before treatment	After treatment
1	33	13
2	39	27
3	42	16
4	34	17
5	31	21
6	59	33
7	43	53
8	50	38
9	67	24
10	43	23
11	28	19
12	46	34
13	60	31
14	23	13
15	39	29
16	42	30
17	26	20
18	56	39
19	36	26
20	52	36
21	47	28
22	63	38
23	28	22
24	36	26
25	29	49
26	38	48
27	60	25
28	7	0
29	51	22
30	32	19

A paired t-test was applied to find out the statistical difference which showed T value 5.93 at 95% confidence interval (P<0.001).

Discussion

Acne vulgaris is a chronic disorder of pilosebaceous follicles which usually occurs in adolescent of both sexes which is characterized by the formation of comedones, erythematous papules, pustules, and nodules [6]. Acne most often affects the face, back, chest, and upper arm [7].

This study was conducted on the acne vulgaris patients attending the Homoeopathic OPD of Ahmedabad Homoeopathic Medical College and attached clinics. The patients were selected as per the inclusion criteria. A total of 30 cases were selected. Pre-treatment score was calculated before the initiation of treatment. Patients were followed up at least once within 6 months of duration of the study. The disease severity score was again calculated post-treatment.

The incidence of acne was seen in adolescents with the highest incidence of acne at 17 years of age which is consistent with the evidence that the acne occurrence is highest among teenagers [1, 8]. The lesions are of multiple or mixed characters commonly presented as comedones (blackhead and whitehead), papules, pustules, nodules, scarring, and cysts. In this study the most common clinical presentation in terms of the predominant type of eruptions were papules, it was presenting complain in 10 individuals; Comedones were predominant in 3 individuals; Pustules were predominant in 6 and nodular was present in 5 individuals; cystic acne was present in 1 individual; scars were predominant in 5 individuals.

In addition to the face, 12 patients presented with an eruption on the back, 5 patients presented with an eruption on chest, and 4 patients presented with an eruption on the upper arm. 2 patients presented with eruptions on 3 regions simultaneously, face, back & chest. Moreover, the incidence of acne was higher in females (56.7%) than males (43.3%) which may be due to differences in the physiology and hormonal balances. This is also consistent with the observation of other researchers [8].

Detailed case taking was performed of each case to erect totality of symptoms. Remedies were selected on the basis of repertorization of the totality of symptoms keeping individualistic approach in mind in the present study of 30 cases. Natrum mur, Silicea & Sulphur were the most commonly prescribed remedies followed by Graphites, Arsenicum alb., Psorinum. Broniya alb, causticum, Ignatia, Lachesis, Lycopodium cl., Merc. sol., Nux vom., Puls., Sepia, Thuja, and Veratrum alb. 17 different remedies were used in 30 patients of the study, which supports the basic philosophy of homoeopathy that individualistic treatment is applicable as well as effective even for Acne vulgaris. The overall treatment compliance was good with no report of any adverse effects.

The improvement after homoeopathic treatment was clearly evident in almost all the patients with an almost 90% success rate. Only 3 patients were not improved during the study period. The reason might be a wrong selection of remedy based on false history, wrong interpretation, and a mistake in erecting totality, the incompleteness of repertory, poor compliance from patient side or treatment failure. Overall, all the patients tolerated the treatment well with good patient compliance which also improved the quality of life of the patients.

The study conducted was based on purposive sampling method only in 30 patients. There were no control groups and there was no randomization of the cases for the assessing the effectiveness of treatment. Therefore, results cannot be generalized and a proper large-scale randomized, controlled clinical trial is advised.

Conclusion

Remedies used for the treatment of cases in my study were selected on the individualistic approach. 17 different remedies were used to treat 30 cases. Homoeopathic individualistic mode of treatment in patients suffering from acne vulgaris is quite effective.

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