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An evidenced based individualistic homoeopathic approach in a case of herpes zoster in geriatric patient: A case report

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Abstract

Herpes-zoster or shingles is an acute, painful, self limiting, cutaneous viral infection that happens due to reactivation of varicella-zoster virus. This is a case report of a geriatric patient, aged 89 years, complaining with sudden vesicular eruption on his forehead with burning pain and oozing yellowish discharge, which transformed into multiple painful blisters overnight. He was treated with individualistic homoeopathic medicine Natrum muriaticum 30C and Natrum muriaticum 200C, administered on the basis of totality of symptoms. Complete healing of skin eruption as well the overall well-being of the patient demonstrating positive role of individualistic homoeopathic treatment in case of herpes-zoster.

Keywords: Herpes zoster, shingles, geriatric patient, individualized homoeopathy

Introduction

Herpes zoster also known as shingles is a viral infection, due to varicella-zoster, which is a part of herpes virus, which grounds an outbreak of painful rash or blister on skin [1-3]. Symptoms typically starts with pain in the affected dermatome, then vesicular eruption comes up in next 2 to 3 days [1-3]. The rash mostly appears as a band of rash or blister with an erythematous base, thoracic and lumbar roots are most common. In most of the cases a single unilateral dermatome is affected but occasionally adjacent and distant areas are also involved. Lesion on tip of nose, inner corner of eye, root and side of the nose, indicates involvement of trigeminal nerve [2] (i.e. Hutchinson sign) which was found positive in this case. This viral syndrome caused by recrudescence of the varicella virus, after suffering from an episode of varicella (Chicken-pox), the virus persisted in dormant state in dorsal root ganglia or sensory ganglia of cranial nerve [1-3]. Emotional stress, use of immuno-suppressant medication, presence of malignancy are triggering factors of this disease. Herpes zoster classically occurs in adults or geriatric patients, due to inefficiency of immune system to resist the latent replication of the virus. Virus causes local inflammation and blistering in the skin and pain caused as a result of inflammation of the affected nerve root [1-3]. Even after resolution of herpes zoster, several patient remains suffered by moderate to severe pain known as post-herpetic neuralgia. Incidence of herpes zoster ranges from 1.2 to 3.4 per 1000 persons per year among younger healthy person. Whereas among older patients more than 65 years, incidence is 3.9 to 11.8 per 1000 persons per year [2]. There is no disparity seen in herpes zoster with season changes.

Patient information: Mr. XY., aged 89 years, BMI-22.5kg/m², retired Govt. employee, middle socio-economic class, suffered from sever burning pain in his right side of forehead, associated with small vesicular eruption that appeared suddenly on 15/2/2021 that continued for last three days. Vesicles were merging together and some were oozing thick yellowish discharge. The affected part was tender to touch. Neither, there were any modalities in relation with warmth or cold application nor with time. On 20/2/2020 the affected part became very tender, oozing same yellowish discharge with brown crusts were formed on it and upper eyelid, right half of face got swelled-up; if that crusts were removed manually they left raw bleeding spots on forehead.

Patient was known type-2 diabetic and hypertensive for last fifteen years, which was under control. He was an widower for last ten years and he was living with his son, daughter-in-law and grand children’s. He was mild, gentle, wellspoken but timid, having aversion to company. He was chilly patient, having profuse thirst. He had white coated moist tongue, desire for sweet, salty food and had aversion for meat and egg; bladder habit-involuntary micturition due to old age, hard stool and difficult to pass with a history of rectal prolapse and internal hemorrhoids, he had aching pain in his right shoulder down upto the elbow, pain in both knees. After thorough case taking, analysis and evaluation of symptoms, following symptoms were considered for repertorization [Table 1]:

- Mind- timid.

- Does not desire company
- Desires sweet.
- Desires salty food.
- Thirsty
- Chilly patient.
- Stool hard, difficult to pass
- Constipation in old people.
- Involuntary urine in old people.
- Eruption on forehead.
- Eruption forehead – herpetic- circinatus.

This case was repertorized by Hompath Classic M.D. Version 8 software using kent Repertory [4].

Table 1: Repertorisation table of first prescription done by repertorisation software

Remedy Name	Sulph	Nat-m	Calc	Phos	Nux-v	Bar-c	Sep	Carb-v	Lyc	Rhus-t	Nat-c	Causl	Ars	Bry
Totality	23	22	21	21	19	18	18	16	16	16	15	15	14	14
Symptom Covered	10	9	10	10	8	10	8	8	8	7	8	6	7	7
[KT] [Mind]Timidity:	3	2	3	3	2	3	3	2	3	2	3	2	2	1
[KT] [Mind]Company:Aversion to:	2	3	1	1	3	3	2	2	2	2	2			2
[KT] [Stomach]Desires Sweets:	3	1	2		1	1	2	2	3	2	2		1	2
[KT] [Stomach]Desires Salt things:	1	3	2	3				3				2		
[KT] [Stomach]Thirst:	3	3	3	3	2	2	1	2	1	3	2	3	3	3
[KT] [Generalities]Heat:Vital,lack of:	2	2	3	3	3	3	2	2	2	3	1	3	3	
[KT] [Rectum]Constipation:Difficult stool:	3	3	2	2	3	2	3	2	2		2	3		3
[KT] [Rectum]Constipation:Old people:	2			2	2	1				1				2
[KT] [Bladder]Urination:Involuntary:Old people,in:				1									2	
[KT] [Face]Eruptions:Forehead:	3	3	2	2	3	1	3	1	2	3	1	2	1	1
[KT] [Face]Eruptions:Crusty,scabby:Forehead:			2										2	
Symptoms	13													
Remedies	277													

After repertorization *Sulphur*10/23, *Natrum muriaticum* scored 9/22 and *Calcarea carb* scored 10/21; but considering the analysis and evaluation of symptoms of the case and consulting the *Materia Medica*, *Natrum muriaticum* was selected.

Timeline, Diagnostic Assessment and Therapeutic Intervention: Patient was followed-up alternative day for three weeks as per need, details of diagnostic assessment, management are given in Table-2.

Table 2: Details of follow-ups and prescription

Date	Symptoms	Prescription
17/2/2020	Vesicular eruption that appeared suddenly on 15/2/2021, continuing for last two days. Vesicles were merging together and some were oozing thick yellowish discharge. The affected part was tender to touch. [Figure-1]	Natrum muriaticum 30, 1 dose
18/2/2020	Condition was same as before, yellow discharges were oozing more than before, both eyelids were painful, red and swollen.[Figure-2]	Placebo
20/2/2020	Right half of face was swollen including the nasal bridge, eyelids were more swollen, yellow discharge increased more. Tenderness and pain was same as before.[Figure-3 (a,b)]	Placebo
22/2/2020	Affected part became very tender, oozing same yellowish discharge with brown crusts were formed on top of right half of forehead and swelling of upper eyelid persisted; If those crusts were removed manually they left raw bleeding spots on forehead.[Figure- 4 (a,b)]	Natrum muriaticum 200, 1 dose
24/2/2020	Tenderness and pain was reduced. Swelling of face and eyelids were reduced than before but still persisting. Yellow discharge was stopped. Affected parts were covered with brown crusty scab.[Figure- 5 (a,b)]	Placebo
29/2/2020	Crusty brown scabs were separated by own without leaving any raw spots, healthy skin appeared slowly. No pain and tenderness of affected part, no swelling of face and eye lids.[Figure- 6(a,b)]	Placebo
10/3/2020	Complete resolution of eruption, leaving scar mark on forehead. [Figure- 7 (a,b,c)]	No medicine.

Clinical images



Fig 1: Before treatment on 17.02.2020 **Figure2:** During treatment on 18.02.2020



Fig 2 (a, b): During treatment on 20.02.2020



Fig 3 (a, b): During treatment on 22.02.2020



Fig 4 (a, b): During treatment on 24.02.2020



Fig 5 (a, b): During treatment on 29.02.2020



Fig 6 (a, b, c): After treatment on 10.03.2020

Discussion

After reactivation of the varicella zoster virus that enters earlier during an episode of chicken pox into cutaneous nerve endings, travels to the dorsal root ganglia, and remains in dormant state. The disease is manifested as multiple, painful, unilateral vesicles formation followed by ulceration, and typical involves a single dermatome innervated by single dorsal root or cranial sensory ganglion. Complications of herpes zoster comprises ocular sequelae, bacterial superinfection of the lesions,

meningoencephalitis and post-herpetic neuralgia etc. The incidence increases with ageing and immunosuppression, therefore prompt management is needed to avoid morbidity and mortality^[9].

Apart from this case report few previous studies and case reports also suggests the efficiency of individual homoeopathic medicine in treatment and control of herpes zoster. Evidenced based homoeopathic treatment of acute herpes zoster (Shingles): A Case report by Yogeshwari Gupta, Khushbu Pandey shows that three to four doses of Hypericum 30 CH provided significant relief within a day and complete recovery within 10 days^[10]. Due to minuteness of dose and prescribing individualized homoeopathic medicine, we can help reducing the distressing side effects or aggravation.

Conclusion

Herpes zoster infection results into numerous complications if left untreated, only in-depth knowledge of this disease will help in early diagnosis, treatment and prevention of the complications having an edge on the individualized homoeopathic treatment strategies. This case report thus shows the positive effect of Individualized Homoeopathic treatment works really fast and effectively in managing the case of Herpes zoster.

Limitations of the study

This is a single case report. In future, case series can be recorded and published to establish the efficacy of individualized homoeopathic medicine in case of herpes zoster.

Informed Consent: The authors certify that they have obtained appropriate patient consent form. The patient has agreed that his images and other clinical information is to be reported in the journal. The patient understood his name and initials will not be included in the manuscript and due efforts will be taken to conceal his identity.

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