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Efficacy of homoeopathic LM potency in psoriasis: A case report

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Abstract

Introduction: Psoriasis is a prevalent, genetically determined, inflammatory skin disorder of unknown cause marked by well-demarcated, raised, red scaling patches that preferentially locate to the extensor surfaces in its most common form [1]. It is a chronic, non-communicable, painful, disfiguring, and disabling disease for which there is currently no cure in conventional method of treatment and is associated with a significant negative impact on the patient's quality of life. However, in the conventional medical system, topical and systemic therapies, as well as phototherapy, are available [2]. Homoeopathic medicines have been found to be effective in treating such cases. We aim to report here a case treated with homoeopathic constitutional medicine with photographic evidences. This case study suggests that homoeopathic individualized constitutional medicine prescribed on the basis of totality of symptoms could be a promising treatment option for the patients suffering from psoriasis.

Case summary: A 17 year old female patient presented with the symptoms of widespread red, thick, hard scaly eruptions from last 4 years. Clinically it was diagnosed as psoriasis. Individualized homoeopathic medicine was prescribed which showed a positive role in the treatment of psoriasis. Modified Naranjo criteria were used to show causal attribution of changes in her condition to homoeopathic treatment. Future observational studies and randomized control trials are suggested to ascertain the efficacy of homoeopathy in the cases of psoriasis.

Keywords: Psoriasis, Individualized homoeopathic medicine, MONARCH, Homoeopathy, case report, Sulphur

Introduction

Psoriasis is a relapsing and remitting chronic inflammatory, hyperproliferative skin disease marked by well-defined, erythematous scaly plaques that are typically symmetrical and affect the extensor surfaces, scalp, and nails [3]. Although there is evidence of genetic risk, the cause of psoriasis is unknown [4]. Psoriasis can also be provoked by external and internal triggers, including mild trauma, sunburn, infections, systemic drugs and stress [5].

Common types of psoriasis includes Psoriasis vulgaris (plaque psoriasis), Guttate psoriasis (droplet psoriasis), pustular psoriasis and Erythrodermic psoriasis [3].

Around 2% of the world's population suffers with psoriasis [3]. Whites have a 2.5 percent frequency, whereas African Americans have a 1.3 percent prevalence. Asians have a substantially lower prevalence (0.8 percent in India, 0.4 percent in China, and 0.3 percent in Japan) [12]. It affects both sexes equally and at any age; while it is uncommon in children under the age of five, more than half of patients present before the age of thirty. The onset age is bimodal, with an early-onset variety occurring in adolescence or early adulthood, often with a familial history of psoriasis, a more severe disease course, and a strong HLA link. The later-onset variant usually appears between the ages of 50 and 60, with no family history and a less severe illness course [3].

Psoriasis can be associated with psoriatic arthritis, an inflammatory arthritis that affects the joints of the spine and other parts of the body [2]. About half of the patients have finger nail involvement. The characteristic nail changes are punctate pitting (Thimble pitting) [6], onycholysis and subungual hyperkeratosis [7].

Psoriasis causes great physical, emotional and social burden. In general, QOL is frequently compromised. Psoriasis patients often face disfigurement, disability and a significant loss of productivity. There are also major costs to mental health, such as higher rates of depression, which have detrimental consequences for individuals and society [8]. Social exclusion, discrimination and stigma are psychologically devastating for individuals suffering from psoriasis and their families.

Here we are discussing a case of Plaque psoriasis which appears in big patches of scales on the elbows and knees and also on other part of the body. As a system of medicine, Homoeopathy offers an effective treatment of Psoriasis by reducing the symptoms and enhancing the quality of life.

Case report

A female patient of 17 years reported in OPD of NHRIMH on 26/10/2020 with the complain of widespread thick, hard scaly eruptions on both the extremities (arm, forearm, thigh, legs, foot) scalp, face, neck, behind and inside ears from last 4 years. Itching of the eruption with occasional watery discharge. Itching aggravated from cold bathing, in night and on perspiration. However warm bathing ameliorates the itching.

On examination erythematous, well-defined plaque, covered with thick whitish squames were observed along with the deformed finger nails.

History of present complaints

Complaints started first on elbows then gradually scalp and legs were involved. The eruption were too dry. She took conventional treatment with ointment then later on she went for ayurvedic treatment but got only temporary relief. She was under Homoeopathic treatment since last few months with calendula mother tincture as external application but without marked relief.

Her past medical history was insignificant.

- Family History
- Mother has DM and Grandmother suffering from DM and UTI.

Physical general

During her case taking she expressed her desire for sweets, aversion for pungent things. Intolerance towards eggs and chicken which leads to itching. Appetite and thirst were reduced. Thermally she was Hot patient. Her vitals were all normal. Mental Generals: She has anxiety about this disease and weeps easily when being scolded.

Intervention

Considering the presenting symptoms, totality was formed and repertorization was done using RADAR OPUS software^[11] and first prescription was done on 26/10/2020 after consultation with Materia Medica and SULPHUR 0/1, 15 doses (AD X HS) was prescribed according to the principles of Organon of Medicinem^[10].

Follow-up and outcomes

Follow-up of the patient was assessed monthly or as required. The date wise detailed follow-ups are summarized as below:

Table 1: Follow-up of the patient was assessed monthly or as required

Date	Symptoms	Medicines with doses repetition
07/12/2020	Thick scaly eruptions on the scalp, ears, neck, both upper and lower extremities reduced. Itching reduced. Generals Good	SULPHUR 0/1, 15 DOSES (AD X HS)
04/01/2021	Thick scaly eruptions on legs and arms reduced. Itching decreased. c/o hairfall. Appetite – decreased. Rest of the generals are good.	SULPHUR 0/1, 15 DOSES (AD X HS)
20/02/2021	Thick scaly lesion reduced. Redness and thickening reduced. Itching reduced. Hairfall reduced. c/o joint pain. Generals improved.	SULPHUR 0/1, 10 DOSES (Once in 3 rd day x HS)
17/04/2021	Scaly eruptions better. Redness, thickness and itching reduced. Joint pain better. Generals improved and good.	SULPHUR 0/1, 10 DOSES (Once in 3 rd day x HS)
22/05/2021	Scaly eruption was better. Generals Good. Got affected by COVID-19. Took conventional medication.	SULPHUR 0/1, 10 DOSES (Once in 3 rd day x HS)
19/06/2021	Scaly eruptions better. Itching nil. No new eruptions appeared. Generals Good.	SAC LAC 10 DOSES (Once in 3 rd day x HS)
24/07/2021	Complaints reappeared. Scaly lesions increased over the scalp, ear and extremities. Itching increased. Generals Good.	SULPHUR 0/1, 10 DOSES (Once in 3 rd day x HS)
25/09/2021	Scaly eruptions decreased. Itching reduced. No new eruptions. Generals Good.	SULPHUR 0/1, 10 DOSES (Once in 3 rd day x HS)
18/12/2021	Psoriatic lesions reduced. No new lesions appeared. Itching nil. Appetite reduced. Thirst increased.	SULPHUR 0/1, 10 DOSES (Once in 3 rd day x HS)
26/02/2022	Scaly eruptions on different part of body almost clear. Itching nil. Appetite improved. Generals Good.	SAC LAC 10 DOSES (Once in 3 rd day x HS)

The modified Naranjo Criteria (MONARCH) [8] was used for assessing causal attribution of improvement to the homoeopathic medicine and the total score was 9 which

suggest a definite association between the medicine and outcome.

Table 2: Assessment by modified naranjo score

		yes	No	Not sure or N/A
1.	Was there an improvement in the main symptoms or condition for which the homoeopathic medicine was prescribed?	+2		
2.	Did the clinical improvement occur within a plausible time frame relative to the drug intake?	+1		
3.	Was there an initial aggravation of symptoms?		0	
4.	Did the effect encompass more than the main symptom or condition, i.e., were other symptoms ultimately improved or changed?	+1		
5.	Did overall wellbeing improve?	+1		
6.	Did the course of improvement follow Hering’s Rule?	+1		
7.	Did old symptoms (non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?			0
8.	Are there alternate causes (other than the medicine) that – with a high probability could have caused the improvement? (e.g. known course of disease, other forms of treatment and other clinically relevant intervention)		+1	
9.	Was the effect confirmed by objective evidence as measured by external observation(s)?		+1	
10.	Did repeat dosing, if conducted, create similar clinical improvement?	+1		

Table 3: Synthesis Treasure

The screenshot shows the Synthesis Treasure software interface. On the left, there is a list of symptoms under the heading '4. Clipboard 4':

- 1. STOMACH - APPETITE - diminished (308)
- 2. STOMACH - THIRSTLESS (220)
- 3. SKIN - ERUPTIONS - psoriasis (121)
- 4. SKIN - ITCHING - night (96)
- 5. SKIN - ITCHING - perspiration - agg. (13)
- 6. SKIN - ITCHING - warm - bathing - amel. (9)
- 7. GENERALS - FOOD AND DRINKS - eggs - agg. (43)
- 8. GENERALS - FOOD AND DRINKS - pungent things - aversion (4)
- 9. GENERALS - FOOD AND DRINKS - sweets - desire (285)
- 10. GENERALS - WARM - agg. (219)

The main area of the software is a grid where each row corresponds to a symptom and each column to a remedy. The remedies listed at the top are: sulphh., h.c., phos.a.c., pulv., calc., mag.c., sep., nat.m., sil., tub., carb.v., chin., kal.s., kali.c., phos., ars., c.mus., plub., idul., perez., thuy., ign., mag.c., nos.v., arg.m., graph., sabad., ant.c., ferr., kali.j., lac.h., ind., merc., pasc., staph., aur.s., bry., zinc, hep.

The grid contains numerical values (1, 2, 3) indicating the strength of the association between the symptom and the remedy. For example, for symptom 1 (Stomach - Appetite - diminished), the values for remedies like sulphh., h.c., phos.a.c., and pulv. are 2, 1, 1, and 1 respectively.



Fig 1: Before Treat



Fig 2: After treatment

Discussion

Homoeopathy is the system of medicine which treat the individual and not the disease. It also aims at a rapid, gentle and permanent restoration of health^[9].

Patient had this complaint from last 4 years. She was taking conventional treatment from the beginning. However there was no relief. But after starting Homoeopathy, she was solely on Homoeopathic medication only. No recurrence is being noted till now. With the help of Constitutional medicine in the LM potency the patient got complete relief.

This case report describe the effectiveness of constitutional homoeopathic treatment in a case of psoriasis. The remedy was selected on the basis of repertorization together with consulting Homoeopathic Materia Medica. A marked improvement of the symptoms were noted gradually in subsequent visits and marked resolution after the complete course of treatment. MONACH have been applied for the assessment of causal attribution of homoeopathic medicine, which showed the positive role of constitutional medicine in the treatment of psoriasis.

Appropriate constitutional and anti-miasmatic medicines, when given in proper dosage are found effective in the treatment of disease. Selection of potency, dose, and repetition must all be chosen in strict conformity with the guidelines laid down in Organon of Medicine.

Conclusion

The present case report evidently suggests the successful treatment of Psoriasis and improving quality of life and restoration of well-being of patient with the help of constitutional homoeopathic medicine. This case has highlighted the importance of holistic approach in the treatment considering the individuality of a patient and the use of repertorization for the remedy selection rather than merely disease symptoms. However, it would not be appropriate to generalize the usefulness of Homoeopathy in cases of Psoriasis on the basis of single case report. Therefore, observational and randomized control trial are recommended to ascertain the result obtained in the present case report.

Consent: The written consent of patient was obtained.

Declaration of the patent consent

The authors certify that they have obtained all necessary patient consent papers. The patient has given her consent images and other clinical informations to be reported in the journal. The patient understands that her name and initials

will not be published and due efforts will be made to conceal identity, but anonymity cannot be guaranteed.

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Conflicts of interest: None declared

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