A case report of bullous pemphigoid treated with homoeopathy

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Abstract
This is a case of 20 years female having multiple vesicles filled with fluid present on her both hands since 4 months, having various sizes from pin point to very large accompanied with intense itching and burning. Systematic case taking followed by repertorisation was done according totality of symptoms by Synthesis Repertory using RADAR software in order to select the individualised homoeopathic remedy where Ranunculus bulbosus, Rhus Toxicodendron, Phosphorus, Mercurius and Sulphur were shortlisted. The patient responded well to the individualised homoeopathic treatment in a very short period of time.

Keywords: Bullous pemphigoid, vesicles, ranunculus bulbosus, homoeopathy

Introduction
Bullous pemphigoid (BP) is the most frequent autoimmune subepidermal blistering disease provoked by autoantibodies directed against two hemi-desmosomal proteins: BP180 and BP230. Its pathogenesis depends on the interaction between predisposing factors, such as human leukocyte antigen (HLA) genes, comorbidities, aging, and trigger factors. Several trigger factors, such as drugs, thermal or electrical burns, surgical procedures, trauma, ultraviolet irradiation, radiotherapy, chemical preparations, transplants, and infections may induce or exacerbate BP disease. Identification of predisposing and trigger factors can increase the understanding of BP pathogenesis. Furthermore, an accurate anamnesis focused on the recognition of a possible trigger factor can improve prognosis by promptly removing it [1].

Who gets bullous pemphigoid?
Bullous pemphigoid occurs most often in people over age 60, but it can appear in younger individuals as well. It is seen more in the Western world; it is not common in the Far East. Both men and women are affected equally by bullous pemphigoid.

What are the symptoms of bullous pemphigoid?
Bullous pemphigoid can present with itching, hive-like welts, and multiple blisters, called bullae. These are most commonly seen on the:
- Arms
- Legs
- Abdomen
- Groin
- Mouth

The blisters may break open and become an open sore or ulcer. The fluid inside may be clear, or contain some blood. The skin around the blisters can appear either normal or red. The blisters are usually located along creases in the skin [2].

Case History
Personal Data
Name of the patient: Y
Age: 20
Sex: Female
Marital status: Unmarried
Address: Bareilly (U.P)
Dated: 28/10/2021

Presenting Complains
Patient complained of fluid filled vesicles on dorsal hands, fingers, forearm, inner thighs, armpit and dorsal foot for last 4 months which are of various size from pinpointed to very large, covered with hard skin and humid on touch. Patient also complained of intense itching and burning in these blisters.

Past History
She had history of burns 1 year back

Physical Generals
Appetite: Reduced
Thirst: Thirstless, Less quantity, At long intervals
Desire: Nothing Significant
Aversion: Nothing Significant
Bowel: Regular, Satisfactory
Urine: Clear, Profuse
Sleep: Refreshing
Perspiration: Generalised, Non-offensive, Non-Staining
Thermal Reaction: Chilly

Mental Generals
Anger\textsuperscript{3+} suppressive (trembling during anger)
Fear – of ghosts\textsuperscript{3+}
Quarrelsome\textsuperscript{3+} but sometimes discontentment

Provisional Diagnosis

Bullous Pemphigoid \textsuperscript{[3]}

Totality of Symptoms
- Fear of ghosts
- Quarrelsome alternating with discontentment
- Vesicular eruptions
- Blisters with itching
- Blisters with burning
- Vesicles humid

Rubrics Selected \textsuperscript{[4]}
1. Mind- Fear- ghosts, of
2. Mind- Quarrelsome-alternating with, discontentment
3. Skin- Eruptions-blisters-itching
4. Skin- Eruptions-blisters-burning
5. Skin-Eruptions-vesicular-humid

Repertorial Analysis of the case
After analysis and evaluation of the case the characteristics symptoms were used to form the totality “vesicular eruptions – blisters with itching, burning and humid” were important particulars in this case. “Fear of ghosts and quarrelsome alternating with discontentment” were important mental generals in this case.
The selection of remedy was based on repertorisation from RADAR 10 software using Synthesis treasure edition, 2009 by Frederick Schroyens \textsuperscript{[4]} with repertorial result showing top five remedies as \textit{Ranunculus bulbosus} \textsuperscript{[5]} (5/5), \textit{Rhus Toxicodendron} (6/4), \textit{Phosphorus} (4/2), \textit{Mercurius} (3/2), \textit{Sulphur} (3/2).

![Repertorial Result](https://www.homoeopathicjournal.com)

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Fig 1: Repertorial Result \textsuperscript{[5]}
Prescription
*Ranunculus bulbosus* [5] 30/3 doses

Follow up

Table 1: Description of followup

<table>
<thead>
<tr>
<th>Date</th>
<th>Symptoms</th>
<th>Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>28/12/2021</td>
<td>1st visit of the patient</td>
<td><em>Ranunculus bulbosus</em> [5] 30/3 doses</td>
</tr>
<tr>
<td>08/11/2021</td>
<td>Bursting of blisters, slight relief in burning</td>
<td>Placebo 30/7 dose</td>
</tr>
<tr>
<td>21/11/2021</td>
<td>Slight relief in itching</td>
<td><em>Ranunculus bulbosus</em> 30/3 doses</td>
</tr>
<tr>
<td>28/11/2021</td>
<td>No new complaint</td>
<td>Placebo 30/7 dose</td>
</tr>
</tbody>
</table>

Conclusion and Discussion
Homoeopathic medicine selected on the basis of homoeopathic principles proved to be very effective in this case of Bullous pemphigoid and shown remarkable results in the treatment. *Ranunculus bulbosus* was selected on the basis of mental generals and particulars and keeping in mind the knowledge of Materia Medica and homoeopathic philosophy. Treatment was continued for 1 month. Medicine was given in very few doses which appeared to be very effective in treatment of the case.

The potency selection was done on the basis of susceptibility of the patient as stated by Dr Close [7]

1. The greater the characteristic symptoms of the drug in the case, the greater the susceptibility to the remedy and the higher the potency required.

2. Age: Medium and higher potency for children.
3. Higher potencies for sensitive, intelligent persons.
4. Higher potencies for person of intellectual or sedentary occupation and those exposed to excitement or to the continual influence of drugs.
5. In terminal condition even the crude drugs may be required.

He also writes “Different potencies act differently in different cases and individuals at different times under different conditions. All may be needed. No one potency, high or low, will meet the requirement of all cases at all times”. Potency was selected on the basis of susceptibility of the patient and organic condition of the disease, the susceptibility of the patient was low so 200 potency was selected.

This case of Bullous pemphigoid re-established the strength of homoeopathy and proves the homoeopathic principles and philosophy as stated by Dr Hahnemann. It also elicited that homoeopathy can cure such type of cases in a very few doses in a very short period of time without any aggravation and side effects.

References
3. World Health Organisation (WHO), icd10data.com,


