A case report on Alopecia Areata

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Abstract

We are discussing here a case of 08yrs female child presented at the private clinic in Dehradun having multiple bald patches on scalp with well-defined margins since 7-8 months and there is no marked modalities and the complaint is associated with slight itching on affected area. The case was analysed according to the homoeopathic principles and Tuberculinum was selected as the individualised remedy according to the totality of symptom of the case which shows remarkable progress in the case with very few doses.

Keywords: Alopecia areata, autoimmune disorder, tuberculinum, homoeopathy

Introduction

Alopecia areata (AA) is a common hair loss condition with a lifetime prevalence of approximately 2% that is characterized by facute onset of non-scarring hair loss in usually sharply defined areas. Some patients lose hair in only a small patch, while others have more extensive or less frequently diffuse involvement. Any hair-bearing area can be affected, but the most noticeable are the scalp, the beard area and the eyebrows [1].

Clinical Presentation

The most frequent clinical presentation of AA is in single or multiple patches. The characteristic patch of AA is usually round or oval, and is completely bald and smooth. Occasionally, AA may progress to complete baldness, which is referred to as alopecia (areata) totalis (AT). When the entire body suffers from complete hair loss, it is referred to as alopecia (areata) universalis (AU). Ophiasis is a form of AA characterized by the loss of hair in the shape of a wave at the circumference of the head and was originally referred to by Celsus. Its name derives from the ancient Greek word for snake (“ophis”), because of the snake-like shape of the pattern of hair loss [1].

Homoeopathic Approach

According to the principles of homoeopathy which is based on the law of similars, homoeopathy proved to be much help in cases of Alopecia Areata. Homoeopathy works on the concept of individualisation and due to its holistic approach, the fundamental cause of the disease can be determined and treated the person in its whole extent.

Case Study

Introduction

Baby X of age 08yrs came with the chief complaints of having multiple bald patches on scalp with well-defined margin since 7-8 month and the size of patch was gradually increasing and the complaint is associated with slight itching on affected area.

Presenting Complaints

- Patient having multiple bald patches on scalp since 7-8 months.
- Location- Frontal, Parietal and on Occipital region.
- Character- circumscribed patch with well-defined margin.
- Associated Complaint- Slight itching on affected area.
- No marked modality.
History of presenting complaints
Patient was apparently well 7-8 month back then her mother gradually observed hair loss from small spot of scalp from frontal region afterwards gradually size of bald patch increasing and her mother noticed few more patches with well-defined margins and patient also experienced slight itching on affected area.

Past Medical History
Nothing significant

Family History
History of tuberculosis

Physical Generals
- Appetite: Normal, 3 meals/day
- Thirst: Take 3-4 ltr/day,
- Desire: Fast food, milk and milk products
- Aversion: Pulses, Green Vegetables
- Urine: clear, non-offensive, D₆ N₂
- Stool: Regular, Satisfactory
- Perspiration: Generalised, non-offensive, non-staining
- Tongue: Clean and moist
- Sleep: Sound, refreshing, 7-8 hrs
- Dream: Nothing significant
- Thermal Reaction: Hot

Mental Generals
- Patient is very irritable.
- Anger is Expressive.
- Use abusive language while fighting with brother.
- Fear of cats and dogs.
- Obstinate in nature.
- Always wants to play and explore new places.

Provisional Diagnosis: Alopecia Areata

Totality of Symptoms
- Multiple bald patches on scalp.
- Slight itching on affected area.
- Desire for milk and milk products.
- Irritable in nature.
- Use abusive language while fighting.
- Fear of cats and dogs.
- Always wants to play and explore new places.
- Past History of Tuberculosis.

Analysis of the case
After the analysis and evaluation of the case characteristics symptoms were used to construct the totality of the symptoms. “Irritability, abusive language, fear of cats and dogs” were some of the mental symptoms. “Desire for milk” is one of the important physical generals. Particulars were “multiple bald patches on scalp, Itching on the affected area. There was history of tuberculosis in family. The final selection of the remedy was on the basis of prevalent miasm, family history of tuberculosis taking into consideration the materia medica and homoeopathic principles.

Prescription: Tuberculinum³ 200/1 dose

Basis of Prescription
The final selection of the medicine was done according to the characteristic symptoms, family history of tuberculosis. The tubercular miasm is the predominant miasm so the remedy was selected on the basis of the prevalent miasm and the family history of tuberculosis. The remedy selected was Tuberculinum. The disease was in organic stage so moderate potency of 200 was selected for prescription.

Potency: Tuberculin needs more frequent repetition in children’s complaints than nearly every other chronic remedy (H. Fergie Woods). Thirtieth and much higher, in infrequent doses. When Tuberculinum fails Syphilinum often follows advantageously, producing a reaction

Table 1: Follow up

<table>
<thead>
<tr>
<th>Dated</th>
<th>Symptoms</th>
<th>Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>20-01-2019</td>
<td>Ist visit of patient</td>
<td></td>
</tr>
<tr>
<td>05-02-2019</td>
<td>There was no significant change in the complaint</td>
<td>Placebo</td>
</tr>
<tr>
<td>25-02-2019</td>
<td>Slight improvement in hairfall</td>
<td>Placebo</td>
</tr>
<tr>
<td>10-03-2019</td>
<td>Bald patches started to recover; itching has reduced</td>
<td>Placebo</td>
</tr>
<tr>
<td>25-03-2019</td>
<td>Itching was relieved, no change in bald patches</td>
<td>Placebo</td>
</tr>
<tr>
<td>10-04-2019</td>
<td>No change in bald patches</td>
<td></td>
</tr>
<tr>
<td>30-04-2019</td>
<td>One of the bald patches was started to grow hair</td>
<td>Placebo</td>
</tr>
<tr>
<td>20-05-2019</td>
<td>Regrowth of hair on the sites of bald patches</td>
<td>Placebo</td>
</tr>
<tr>
<td>10-06-2019</td>
<td>All the bald patches have regrowth of hair</td>
<td>Placebo</td>
</tr>
</tbody>
</table>

Fig 1: Before Treatment
Discussion and Conclusion
In the above case of Alopecia Areata, initially a medicine was selected based on the totality of symptoms and analysing the case of the patient and the medicine was given therapeutically with family history and other characteristic symptoms taken in consideration without doing any repertorization according to the prevalent miasm. When patient came for consultation, she was presented with multiple bald patches on scalp with slight itching. After thorough case taking symptoms were aggregated to make the totality, final selection of remedy is done by observing the mental generals, physical generals and particulars of the patient on the basis of individualisation. The treatment was given for 6 months in which *Tuberculinum* was repeated twice only as the improvement was ceased with continuation of placebo. *Tuberculinum* was the medicine selected and given in four doses on the first visit of patient. The patient was markedly improved on just a few repetitions (One dose of *Tuberculinum*). There was marked, improvement in bald patches chief complaints of the patient along with the associated symptoms (itching on affected area). Afterwards patient has been continued with placebo on his next visit with steady improvement. The results of the case have re-established the strength of homoeopathic principles and its philosophy of gentle and speedy recovery in just one visit of the patient in a very few doses along with the concept of individualisation. Homoeopathic medicine selected on the basis of principles of homoeopathy has proved to be effective and shown marked improvement in this case of Alopecia Areata along with the associated symptoms. Thus, the case has proved the holistic concept of homoeopathy along with individualisation.

Constantine Hering[^4]: If the symptoms of the case generally have more resemblance to the primary symptoms of the drug, then lower potencies, on the contrary more resemblance with the later effects (secondary action) thence advocate higher potencies.”

Dr. Close[^5]
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 potencies for children
3. Higher potencies for sensitive, intelligent persons.
4. Higher potencies for persons of intellectual or sedentary occupation and those exposed to excitement or to the continual influence of drugs.
5. In terminal conditions even the crude drugs may be required.

Conflict of Interest
Not available

Financial Support
Not available

References