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PGT, Department of Homoeopathic Pharmacy, GD Memorial Homoeopathic Medical College & Hospital East Ramkrishnanagr, Patna, Bihar, India Psoriasis treated with individualized homoeopathic medicine: A case report

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Abstract

Psoriasis is a chronic autoimmune skin disease. Psoriasis occurs at any age but most commonly occur in adult age under fifty years. It is chronic in nature and produces functional disability, significant disfigurement, and substantial impairment in quality of life. This case report of a patient of psoriasis successfully treated by homoeopathic medicine. In this article I reported a case of psoriasis successfully treated by rare homoeopathic medicine, Phosphorus, which was prescribed according to totality of symptoms, after 8 months of continue follow up the patient is cure without any recurrence.

Keywords: Psoriasis, individualisation, repertory, homoeopathy

Introduction

Psoriasis is chronic inflammatory skin disorder which affect about 2-3% of overall population^[1]. The exact cause of psoriasis is unknown but environmental factor tacking a leading role. It is more common in male then female ^[2, 1]. It has significant impact on life quality. Psoriasis commonly five types which are Guttae, palmoplantar, inverse, Plaque, Erythrodermic psoriasis ^[3]. The psoriatic patches commonly occur in scalp, knee, elbow, hand, leg. The common symptoms are erythema, fissuring, scaling, symmetrical distribution of patches, itching etc ^[4]. It is associated with number of systemic disorders which include cardiovascular disease, diabetes, gastrointestinal problem, renal disease, psychological problem [5] [6]. Recent studies show that 10-15% psoriasis may have family history of psoriasis and 10-20% psoriasis cases of young age may develop psoriatic arthritis ^[6]. In modern medicine topical application mainly corticosteroid, immunomodifying sustained use long time but no specific result so he opted homoeopathic treatment as a second choice. Homoeopathic based on individualization, Law of similar, miasmatical theories. Homoeopathy treats the patient not the disease. In the based-on totality of symptoms and cardinal principal of homoeopathy individualised homoeopathic remedy can permanently eradicate the symptoms as whole. In Materia medica of homoeopathy there are numerous types of medicine in the treatment of psoriasis like sulphur, Arsenicum album, Graphites,

sepia, Tellurium, Mezereum, Rhus Toxicodendron, Dulcamara etc. This case report shows homoeopathic medicine phosphorus effective in Psoriasis.

Case Report Demographic information-

Age – 37 years, Sex – Male, Occupation – Farmer

Main symptoms

Rough patches on hand and leg, itching, peeling after scratching.

Medical history

He was taken more then 2 years allopathic medicine but no specific result so he opted homoeopathic treatment.

Past History

History of jaundice 10 years back.

Family history

Father – Hypertension, osteoarthritis. Mother – osteoarthritis, Diabetes mellitus

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Mental general

- 1. Anxiety.
- 2. Fear of water.
- 3. refuse to answer properly [Informed by patients' wife].

Physical general and particulars

Appetite – good, Desire- sour, Aversion- Milk, Stool- clear (passed 2-3 times a days), Perspiration- offensive, Thirst – Thirstless, Tongue – moist, Sleep- sleeplessness (Dream – fire), Urine – clear, Thermal reaction – chilly.

Clinical findings

He was lean thin with black complexion, weight 49 kg and cyanosis, clubbing, jaundice, oedema not detected.

On examination

Psoriasis on hand and leg.

Laboratory testings

Reported on

03.01.2022 - HB% - 10g/dl, Ige - 416.9 IU/ml [Fig No: 4a] 01.05.2022 - HB% - 12g/dl, Ige - 234.2 IU/ ml [Fig No: 4b] 01.07.2022 - 153.2 IU/ dl [Fig No: 4c].

Reportorial analysis

Repertorisation done by Kents repertory using Zomeo Elite software [Figure 3]. The rubric related in Kent repertory: - Extremities-Eruptions-leg-psoriasis and Extremities-Eruptions-Hand, back of hand-psoriasis, chronic^[7]. Analysis and evolution of following symptoms for Kents method [Table 1] phosphorus [26/12], sulphur [23/10], Arsenicum album [20/9], Heper sulphuricum [17/8], Rhus tox [16/7], Sepia [16/7], pulsatilla [16/6] were coming in top score. In this case phosphorus was prudently chosen because it covers mentals, physicals as well as particulars with highest degree.

Remedy selection and administration

Phosphorus 0/1 One dose in a day for 1 month in morning empty stomach with LPL twice daily.

Advice

Advised to keep proper hygiene, balance diet, and avoid apply unmedicinal component in effected area.

Follow up and outcome

Follow up were done at 1 month interval. Marked changes were elicited at the end of treatment [Fig - 1 a/b/], [Fig - 2 a/b/]. Treatment was done periodically with single medicine phosphorus 0/1.Hahnemann stated in organic of medicine aphorism no 270, in case of minimum aggravation and perfect remedial effect 50 millesimal potency is one of the best choices for physician. Monthly follow up the patient.

Improvement was found gradually, no new eruption and itching ameliorated after 6 months of treatment. The treatment was continued for more then 8 months to address any recurrence of old complaints or any new complaints [Table 2].

Discussion

Homoeopathy is a treatment option for young adults suffering from psoriasis and suggesting further studies to investigate the role of homoeopathic medicine for this case. Our study used individualised medicines based on "law of similia" and totality of symptoms broadly covering from homoeopathic point of view. The miasmatical interpretation of psoriasis- psora [persistent itching, dry, scaly rough eruption, < Open air, > Night], Syphilis [Heavy and thick scale, little soreness, circular grouping], Sycotic [Eruption in circumscribed spot, exfoliating, Scaly and patchy skin eruption]. This case was conducted on the patient suffering from psoriasis attending in my clinic on 12/12/2021. The presenting complain was psoriasis in hand and leg, with hard stool, thirstless, offensive sweat. After repertorisation phosphorus, sulphur, Arsenicum album, Hepar sulphuricum, Rhus tox sepia coming in leading score. Dr S Rahman, Dr. JK Dey, Dr. H Ram, Dr. M Kamboj in Previous case report about homoeopathic medicine and its efficacy in the treatment of psoriasis [8] [9]. In this case phosphorus was selected because it covers mentals, physicals as well as particulars with highest gradation. So, I prescribed phosphorus 0/1 1 dose associated with placebo in liquid form twice daily after 5 months psoriasis was 50 % improved, due to intensity of symptoms potency increase but the medicine was same. After 8-months patient is overall good, no new eruption. The homoeopathic medicine along with assurance can help in alleviating disease symptoms as well as improve the quality of life.

Some attachment

Table 1: Analysis and evolution

	symptoms	Analysis	Intensity
1	Anxiety	Mental general	++
2	Fear of water	Mental general	++
3	Refuse to answer	Mental general	++
3	Desire sour	Physical general	++
4	Aversion milk	Physical general	++
5	Dream of fire	Physical general	++
6	Thirstless	Physical general	++
7	offensive sweat	Physical general	++
8	Chilly patient	Physical general	++
9	Psoriasis in leg	Particular	++
10	Psoriasis in hand,	Particular	++

Table 2: Follow up

Date	Changes in signs and symptoms	Treatment and management
12.12.2021	First case taking	Phosphorus 0/1
12.12.2021	Thist case taking	LPL Twice daily for 29 days
11.01.2022	Eruption still present, offensive sweat, itching also present after taking first	Phosphorus 0/2
11.01.2022	dose. report: HB%-10g/ dl, Ige- 416.9 IU/ml.Reported on 03.01.2022.	LPL Twice daily for 29 days
11.02.2022	improve eruption, itching decrease slightly. peeling present.	Phosphorus 0/3
11.02.2022	improve eruption, itching decrease singhtly, peening present.	LPL Twice daily for 29 days
10.03.2022	Standstill condition after progressive improvement for about 3 months.	Phosphorus 0/4
10.03.2022	psoriasis spot present with itching and Pelling.	LPL Twice daily for 29 days
O9.04.2022	Itching improved, sweat offensiveness reduced, Pelling present.	Phosphorus 0/5

		LPL twice daily for 30 days
08.05.2022	Psoriasis patch improved, some new eruption, Itching present, HB%-12g/dl,	Phosphorus 0/6
08.03.2022	IGE- 234.2 IU/ml. Reported on 01.05.2022.	LPL twice daily for 30 days
07.06.2022	Itching slightly present, all other symptoms improved. No Pelling after	Phosphorus 0/7
07.00.2022	scratching.	LPL twice daily for 30 days.
06.07.2022	Itching improved gradually. Absence of psoriatic patch. IGE – 153.2 IU/ml.	Placebo
00.07.2022	Reported on 01.07.2022.	T lacebo
05.08.2022	No itching, patient is overall good.	advice to visit if there any recurrence



Fig 1a: Before Treatment



Fig 1b: After Treatment



Fig 2a: Before treatment



Fig 2b: After Treatment

Symptoms : 12 Remedies : 283 Filters : Normal																			
Remedy	Phos	Sulph	Ars	Hep	Rhus-t	Sep	Puls	Carb-v	Graph	lyc	Bell	Kali-ar	Nux-v	Kali-c	Mag-c	Petr	Sil	Chin	Sabad
Totality	26	23	20	17	16	16	16	15	15	15	14	14	14	14	14	14	14	13	13
Symptoms Covered	12	10	9	8	7	7	6	7	6	6	9	8	8	7	7	7	6	7	7
Kingdom		+			>	*	>			>	>		>					>	>
[Kent] [Mind]ANXIETY: (202)	3	3	3	2	3	2	3	3	2	3	3	3	2	3	2	2	2	3	2
[Kent] [Mind]FEAR (SEE ANXIETY):Water, of: (17)	2										2		1						1
[Kent] [Mind]ANSWERS:Refuses to: (26)	3	3	1								1		1			1		2	1
[Kent] [Sleep]DREAMS:Fire: (50)	2	2	2	3	2			1	1		2	1		1	3		1	1	
[Kent] [Stomach]DESIRES:Sour,acids,etc.: (77)	2	2	2	3	1	2	2	2			1	2		2	2			1	2
[Kent] [Stomach]AVERSION:Milk: (30)	1	2				2	2	2			1		1		1		2		
[Kent] [Stomach]THIRSTLESS: (87)	1	1	2	1		2	3			2	2	1	1	2		1		3	3
[Kent] [Perspiration]ODOUR:Offensive: (59)	2	3	2	3	2	3	3	2	3	3	1	1	3	1	1	3	3		
[Kent] [Generalities]HEAT:Vital,lack of: (108)	3	2	З	3	3	2		2	3	2		3	3	3	2	Z	3	2	2
[Kent] [Extremities]ERUPTION:Leg:Psoriasis: (2)	3											1							
[Kent] [Extremities]ERUPTION:Hand:Back of hand:Psoriasis,chronic: (13)	2	2	2	1	2				3	2						3			
[Kent] [Skin]ITCHING: (172)	2	3	3	1	3	3	3	3	3	3	1	2	2	2	3	2	3	1	2

Fig 3: Repertorization Sheet

TAL IGE	C.L.I.A Age 0 – 1 year	416.9 value	IU/ml
	0 – 1 year	value	
		1.40-52.3	
	1 - 4 year	.40 - 351.6	
	5-10 years	.50 - 393	
	11 – 15 year Adults	1.90 - 170 < 158	
	e range of normally expected values ilways be assessed in conjunction w		
ccifications: ccision: Intra assay(%C	:V): 7.2%, Intra assay(%CV): 5.4%	, Sensitivity: 1.5 IU/m1	
EASE CORRELATE	WITH CLINICAL CONDITIONS.		
THOD: - TWO SITE	SANDWICH IMMUNOASSAY		
	0		

Fig 4A: IGE Report - 03/01/2022

TEST NAME	TECHNOCOLOGY	VALUE	UNIT
TOTAL IGE	C.L.I.A	234.2	IU/ml
	Age	value	
	0 - 1 year	1.40-52.3	
	1-4 year	.40 - 351.6	
	5 - 10 years	.50 - 393	
	11 - 15 year	1.90 - 170	
	Adults	< 158	
Quantitative measure for the differential cl	ement of serum IGE when integrated w linical diagnosis of atopic and non ato	pic disease. Patients with atop	oic disease, including allerg
Quantitative measure for the differential cl asthma, allergic rhini Ige level that is withi purposes, results sho other findings.	ement of serum IGE when integrated w	pic disease. Patients with atop ve moderately elevated serum s does not rule out a limited set	ic disease, including allerg Ige levels. However, a seru of Ige allergy. For diagnost
Quantitative measure for the differential cl asthma, allergic rhini Ige level that is withi purposes, results sho other findings.	ement of serum IGE when integrated w linical diagnosis of atopic and non ato it is and atopic dermatit is commonly ha in the range of normally expected values	pic disease. Patients with atop ve moderately elevated scrum s does not rule out a limited set with the patient's medical hist	ic disease, including allerg Ige levels. However, a seru of Ige allergy. For diagnost
Quantitative measure for the differential cl asthma, allergic rhini Ige level that is withi purposes, results sho other findings. Specifications: Precision: Intra assay	ement of serum IGE when integrated w linical diagnosis of atopic and non ato itis and atopic dermatitis commonly ha in the range of normally expected values uld always be assessed in conjunction v	pic disease. Patients with atop we moderately elevated serum does not rule out a limited set with the patient's medical hist %, Sensitivity: 1.5 IU/ml	ic disease, including allerg Ige levels. However, a seru of Ige allergy. For diagnost
For the differential cl asthma, allergic rhini Ige level that is withi purposes, results sho other findings. Specifications: Precision: Intra assay PLEASE CORRELA	ement of serum IGE when integrated w linical diagnosis of atopic and non ato itis and atopic dermatitis commonly ha in the range of normally expected values uld always be assessed in conjunction w (%CV): 7.2%, Intra assay(%CV): 5.4%	pic disease. Patients with atop we moderately elevated serum does not rule out a limited set with the patient's medical hist %, Sensitivity: 1.5 IU/ml	ic disease, including allerg Ige levels. However, a seru of Ige allergy. For diagnost
Quantitative measur for the differential cl asthma, allergic rhini Ige level that is withi purposes, results sho other findings. Specifications: Precision: Intra assay PLEASE CORRELA	ement of serum IGE when integrated w linical diagnosis of atopic and non ato itis and atopic dermatitis commonly ha in the range of normally expected values uld always be assessed in conjunction w (%CV): 7.2%, Intra assay(%CV): 5.4% ITE WITH CLINICAL CONDITIONS	pic disease. Patients with a top we moderately elevated scrum does not rule out a limited set with the patient's medical hist %, Sensitivity: 1.5 IU/ml	ic disease, including allerg Ige levels. However, a seru of Ige allergy. For diagnost

Fig 4B: IGE Report - 01/05/2022



Fig 4c: IGE Report - 01/07/2022

Conclusion

Form this study, it has been observed that the homoeopathic medicine prescribed on basis of totality of symptoms of a patient suffering from psoriasis had shown beneficial result and the medicine is effective. Homoeopathy plays observably statistical role in the treatment of psoriasis.

Declaration of patient consent

Author certifies that he had obtained appropriate patient consent form. In this form patient agreed that his image to be reported in the journal.

Acknowledgment

I gratefully acknowledged the active cooperation and participation made by patient.

Conflict of Interest

Not available

Financial Support

Not available

References

- 1. Sarkar R. editor. Concise Dermatology. CRC Press; c2021 Mar 4.
- 2. Pasricha JS, Verma K. Treatment of skin diseases. JP Medical Ltd; c2013 May 30.
- 3. Whitfield A. A handbook of skin diseases and their treatment. Edward Arnold; c1921.
- 4. Hall BJ, Hall JC, editors. Sauer's manual of skin diseases. Lippincott Williams & Wilkins; c2010.
- Khanna N. Illustrated Synopsis of Dermatology & Sexually Transmitted Diseases-Ebk. Elsevier India; c2019 Aug 2.
- 6. Khopkar U. Skin Diseases & Sexually Transmitted Infections. Bhalani Publishers; c2018.
- 7. Kent JT. Repertory of the homoeopathic Materia medica. B. Jain Publishers; c1992.
- 8. Rahman S, Dey JK. A case report of plantar psoriasis treated with homoeopathy. Homoeopathic Links. 2018

Dec;31(04):248-53. [3]

9. Ram H, Kamboj M. Effect of individualized homoeopathic medicine in psoriasis: A case report. National Homoeopathic Recorder. 2019;15(2):3.

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