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Individualized homoeopathic approach with the scope of body-language in the treatment of tinea capitis: A case report

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Abstract

Tinea capitis is a fungal infection, also known as Ringworm of the scalp. This condition is manifested by dry, scaly rashes, severe itchiness, Patches of hair loss (alopecia), flaking scalp that resembles dandruff, etc. The Primordial science of Body Language is called as 'Kinesics'. Body language is a confluent point of mind and body and when a person becomes sick, he represents the sickness through his unique body signals such as the cluster of gestures and postures which are represented as the concept of totality.

Case Summary: A case of Tinea Capitis in an 8 year old boy, lodged with the Patchy hair loss and scaly eruptions with severe itching at the right parietal region. The Homoeopathic medicine *Baryta carb* was given on the basis of the Body language of the patient and totality of the symptoms for 2 months. The Scaly eruptions were reduced completely within 15 days and the patchy hair loss lesion was recovered within 2 months. This case report shows the scope of Body Language with Homoeopathic management in the case of Tinea capitis.

Keywords: Homoeopathy, body language, tinea capitis, fungal infection, *Baryta carb*, kinesics

Introduction

Tinea capitis is a fungal infection, also known as Ringworm of the scalp and herpes tonsurans infection. It is mainly caused by the dermatophyte species *Microsporum* and *Trichophyton*. The fungi penetrates the hair follicle's outer root sheath and ultimately invade the hair shaft. Clinically, this fungal infection divides into inflammatory and non-inflammatory types. The non-inflammatory type usually will not have any scarring alopecia. The inflammatory type results in a kerion (painful nodules with pus) and also with scarring alopecia. Tinea capitis affects mainly in children between 3 and 14 years of age, but it might affect any group of ages^[1]. Transmission of the infection takes place through direct contact with organisms from: Humans, Animals, Soil and Indirectly through fomites: hats, hairbrushes, etc. The incidence of Tinea capitis is not known; in India, it varies from 0.5% to 10%^[2].

The Primordial science of Body Language is called as 'Kinesics'. Body language is a confluent point of mind and body and when a person becomes sick, he represents the sickness through his unique body signals such as the cluster of gestures and postures which are represented as the concept of totality. Body language is a keyhole to look into the invisible, intricate, indefinable and exclusive mind. One of the benefits of learning body language, is sharpening the perception. While attending to verbal language we need to pay attention to the 'WISENESS' of the body. In some cases, even before a patient starts his verbal communication, his personal appearance, voice, clothes, perfumes, the body parts – the facial and eye expressions, arm and leg gestures, have sent their messages revealing the inner feelings, ideas, attitudes, intentions and hidden conflicts^[3].

Homoeopathy is based on law of similimum, and selection of remedy is based on Constitutional approach in management of any disease. The constitutional approach refers to the treatment of a person as a whole, including their past and present symptoms. When perfectly implemented, homoeopathic constitutional treatment can elicit a profound healing response. Homoeopathy is well known for treating innumerable skin diseases. There are many evidences of treating many skin diseases and infections such as Tinea capitis, Tinea corporis, Alopecia, etc.^[4].

Total number of symptoms covered

symptoms of the patient	body language of the patient
Slow at learning activities. Dull, slow. Doesn't play with his friends. Eruptions on the scalp with itching. Alopecia - falling out hair in children. Chilly patient. Delayed milestones.	Hides when he sees strangers, Face - shy. Covering his face with hands. Voice - Hesitating. Downward Gaze.

Selection of remedy with potency: Baryta Carb 200.

Intervention: First prescription: On 01 December 2021,

Baryta carb 200C, 1 dose followed by Rubrum 200 for the next 15 days. Basis of prescription: Medicine selected on the basis of individualization, Body language and symptom totality with the consultation of Kent Materia Medica - was Baryta carb. Furthermore, Bayta carb was chosen as it covers the totality of symptoms and the patient's thermal reaction was chilly with delayed milestones [5]. Baryta carb 200C, 1 dose followed by Rubrum 200 for the next 15 days, was prescribed.

Follow up and outcomes

Follow-up of the patient was assessed for every 15days or as required. The date wise detailed follow-ups are summarized in Table-2.

Table 2: Time line including follow-up of the case

Date	Symptoms	Medicine with doses	Justification
16 December 2021	1. Hair-fall reduced 100%. 2. Scaly eruptions are reduced completely 100%.	1. Baryta carb 200, 1 dose. 2. Rubrum 200/BD/15 days	As there was improvement noted, <i>Baryta carb</i> 200C was continued.
02 January 2022	1. No recurrence of the scaly eruptions on the patch. 2. The patchy lesion has started to have small hair follicles.	1. Baryta carb 200, 1 dose. 2. Rubrum 200/BD/15 days.	No recurrence of the eruptions is seen and there was a new hair growth. Therefore, the same medicine was continued.
18 January 2022	1. Patchy bald area was recovered completely with healthy new hair. 2. No fresh complaints.	1. Baryta carb 200, 1 dose. 2. Rubrum 200/BD/15days.	There was distinct improvement in the bald patch, the medicine was repeated.
4 February 2022	1. No recurrence of the patchy hairfall/ baldness is seen. Patient has improved completely in both physical and mental platform.	1. Rubrum 200/BD/1 month.	As there was complete disappearance of bald patch on head, Rubrum was prescribed.

Improvement

Before	After
1. Eruptions on the scalp with Itching. 2. Patchy Hair loss. 3. Difficult in concentration. 4. Hides when sees any strangers. 5. Covers his face with hand, shyness. 6. Voice - Hesitating.	1. Eruptions and Itching completely reduced. 2. Reduced completely and No reoccurrence. 3. Able to focus on things. 4. Doesn't hide anymore and wishes everyone with smile. 5. Doesn't covers his face and smiles at everyone. 6. Speaks freely.

Result

The scaly eruptions got reduced completely in the first follow up and the patchy hair loss lesion was gradually covered completely within the span of 2 months. Baryta

carb 200C showed a marked improvement. The total well-being of the patient is better and the child's behavior is completely changed in the positive manner.

Case report of Tinea Capitis



Fig 1: Before treatment



Fig 2: During treatment



Fig 3: After treatment

Discussion

The Patient presented with a single patchy hair loss with scaly eruptions on the lesion at the right parietal region. This case was treated with individualized homoeopathic medicine which showed complete re-growth of the hair on the patchy area and without any recurrence in follow up period. Minali Dubey presented an article of 'A case of Tinea Capitis treated by Homoeopathy Medicine' in which Calcarea carb 1M is prescribed to multiple patches on the scalp and was treated successfully [6]. Whereas in another research article. Dr. Atul Kumar Singh has presented 'Different types of Dermatophytic infection on the basis of site homoeopathic approach: Case series' in which the 5th case is about tinea capitis and the remedy Merc sol 30C was prescribed and has given a tremendous result [7].

Conclusion

Homoeopathy is a specialized system of medicine. It treats patient as whole and not just symptoms; in which the body language plays a significant role in prescribing the perfect remedy. A complete re-growth of the hair on the bald patch and complete reduction of the scaly eruptions on the lesion is a documentary evidence. This case shows a positive role of Body language and Homoeopathy in treating the Tinea Capitis. However, as this is a single case study and Tinea Capitis is associated with a variable and unpredictable remission, well-designed studies along with the personal hygiene may be taken up for the scientific validation of results.

Declaration of patient consent

In the form, the patient's mother has given her consent for her child's images and other clinical information to be reported in the journal. The patient's mother understands that the child's name and initial will not be published, and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

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