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## CASE REPORT

### Title: Homoeopathic management of eczema: A case report

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## ABSTRACT

Eczema is an inflammatory skin condition clinically presents with itchy, dry, rough, scaly and inflamed skin. This is a case report of a 28 year old female having itchy and dry skin lesions on her both hands, since past 2 years. In this article, a case of eczema cured with the well selected homoeopathic remedy after detailed case taking and repertorisation, which improved physical as well as mental well-being of the patient, is being explained.

**Keywords:** *Eczema, Dermatitis, Graphites, Homoeopathy*

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## INTRODUCTION

The term Eczema is synonymous with term Dermatitis. It is an inflammatory response to various agents acting on the skin such as chemicals, drugs, increased sensitiveness to antigens and haptens etc. It is clinically characterized by eruptions (papules, vesicles or blisters) that may present with itching, erythema with oedema, oozing and scaling.<sup>[1]</sup> Eczema is also called as the "itch that rashes" caused due to dry skin that produces rashes due to scratching. Hydration of skin is most important for treatment of eczema.<sup>[2]</sup>

### Different types of eczema are:<sup>[3]</sup>

- **Atopic eczema** – It is due to formation of excessive IgE antibodies to inhaled, injected or ingested antigens. Mostly occurs in people having family history of this condition.
- **Seborrhoeic dermatitis** – It is presented by a reddish rash with scales, usually affects the scalp, central face, nasolabial folds, eyebrows and centre of chest.
- **Discoïd eczema** – It consists of coin shaped lesions, which may be infected, commonly seen on the extremities.
- **Allergic contact eczema** – It is due to type IV hypersensitivity reaction after contact with various antigens.
- **Asteatotic eczema** – It occurs in dry skin, and commonly seen on the legs in hospitalized patients.
- **Gravitational eczema** – It usually occurs in legs and associated with insufficiency of veins.
- **Lichen simplex** – This is a localised plaque of hard skin caused due to rubbing or scratching repeatedly. Usually occurs in neck, lower legs and anogenital area.
- **Pompholyx** – It occurs in the form of vesicles and bullae with itching mainly occurring on the palms, palmar surface and sides of the fingers and soles.

### DIFFERENTIAL DIAGNOSIS:

- **Psoriasis** – It is a chronic inflammatory disease which causes rapid proliferation of skin. It is presented by erythema, plaques with silvery white scales and itching (more

scales and less itching as compared to eczema). The precipitating factors are mental stress, trauma and drugs like beta-blockers. Complications can be psoriatic arthritis and onycholysis.<sup>[3]</sup>

- **Tinea manuum** – Also known as ringworm of hand. It is caused by dermatophytes or fungi and risk factors are humid environment, hypertension, diabetes mellitus, recurrent trauma to hands etc. The lesion is clinically presented by red scaly rashes on edge with central clearing and itching.<sup>[4]</sup>

This case report will help the clinical practitioners to know the effectiveness of homoeopathic medicines in the cases of eczema and it will also help in better understanding of the disease dermatitis or eczema along with its differential diagnosis.

## CASE RECORD

A female aged 28 year old reported with complaint of dry skin lesions on her both hands, since past 2 years.

### PRESENTING COMPLAINT:

The patient presented with dryness, itching, redness and cracks on her both hands. There was oozing of watery, sticky and offensive discharge followed by scratching due to itching. Itching worse at night and complaints were better by warmth.

### HISTORY OF PRESENTING COMPLAINTS:

Patient had history of these complaints since 2 years. Complaints started with minor eruptions on index finger of left hand, from where it spread to both hands. Itching was tolerable at starting but it gradually increased day by day. She took allopathic medication and applied external application on eruptions which relieved for sometime, but as soon as she stopped the treatment, itching appeared severely with eruptions and cracks covering both the hands with oozing of sticky, watery discharge after scratching. She was not taking any treatment for the last 1 month.



Figure 1: Before treatment

### GYNAE & OBS HISTORY

Her last menstrual periods occurred on 06/07/2022 and had no associated complaints. Her menstrual cycle is regular, occurs for 4-5 days, every 26-28 days and without any abnormalities.

### PAST HISTORY

H/O Jaundice at 10 years and typhoid in 18 years. She had taken allopathic treatment for those complaints and was cured.

### FAMILY HISTORY

Father – Healthy and alive

Mother – Type II Diabetes mellitus and alive

### PHYSICAL GENERALS

Appetite – adequate, 3 meals/ day, 2-3 chapatti/meal

Thirst – adequate, 3-4L/day

Desire – Sweets

Aversion – Spicy food

Stool – Unsatisfactory stool and irregular bowel habits

Urine – Satisfactory, 5-6 times a day

Perspiration – Scanty, generalized, non-offensive, non-staining

Thermal reaction – Chilly

Sleep – Disturbed due to itching

### MENTAL GENERALS

Patient was irritable and anxious due to her illness. She weeps easily, became lachrymose while telling about her complaints. She had a fear that some misfortune would happen to her. According to her husband she does not keep things to herself and she is an extrovert person.

### PROVISIONAL DIAGNOSIS

After ruling out all the other possible causes of eruptions, and according to the history of the disease, it was diagnosed as Eczema of hands.<sup>[3]</sup>

**TABLE-1 ANALYSIS AND EVALUATION OF SYMPTOMS**

Symptoms of patient	Intensity	Common/ symptoms	Uncommon	Miasm
<b>Mental Generals</b>				
• Irritability	+	Uncommon		Psora
• Anxious about her health	++	Uncommon		Psora
• Fear of misfortune	++	Uncommon		Sycosis
• Weeping easily	++	Uncommon		Psora
<b>Physical Generals</b>				
• Desire – Sweets	+	Uncommon		Psora
• Aversion – Spicy	+++	Uncommon		Psora
• Thermal reaction – Chilly	++	Uncommon		Psora
• Disturbed sleep due to itching	+	Common		Psora
<b>Particulars</b>				
• Dry, cracked skin with itching. < night, > warmth	+++	Uncommon		Psora
• Skin eruptions oozing sticky discharge	+++	Uncommon		Psora

**TOTALITY OF SYMPTOMS**

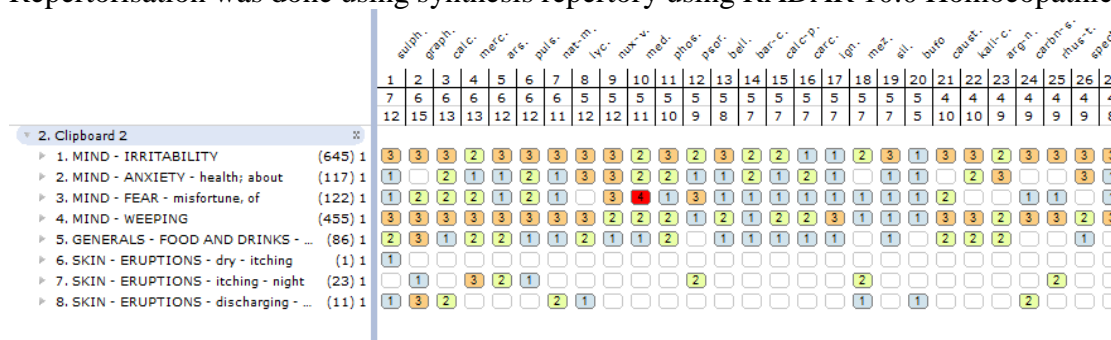
- Irritability
- Anxious about her health
- Fear of misfortune
- Weeping easily
- Desire – Sweets
- Aversion – Spicy
- Thermal reaction – Chilly
- Dry, cracked skin with itching. < night, > warmth
- Skin eruptions oozing sticky discharge

**REPORTORIAL TOTALITY**

1. MIND – IRRITABILITY
2. MIND – ANXIETY – health; about
3. MIND – FEAR – misfortune, of
4. MIND – WEEPING
5. GENERALS – FOOD AND DRINKS – sweets, desire
6. SKIN – ERUPTIONS – dry – itching
7. SKIN – ERUPTIONS – itching – night
8. SKIN – ERUPTIONS – discharging, glutinous

**REPORTORIAL CHART: FIGURE 3**

Repertorisation was done using synthesis repertory using RADAR 10.0 Homoeopathic software.<sup>[5]</sup>



**TREATMENT**

**SELECTION OF REMEDY AND POTENCY :** *Graphites* was the remedy selected based on repertorisation and homoeopathic materia medica. *Graphites* was the remedy of choice as it covers the mental as well as physical disposition of the patient. Also, thermally the patient was chilly and *Sulphur* is hot, hence *Graphites* is selected.<sup>[6,7]</sup>

On the basis of susceptibility of patient, nature and duration of disease, 30C potency was selected.

**INTERVENTION**

First visit (16/07/2022) – *Graphites* 30/OD/3 days followed by placebo for 2 weeks.

Patient was advised to apply coconut oil on the skin throughout the treatment.

**TABLE-2 FOLLOW UPS**

Date	Symptoms	Prescription
30/07/2022	Skin itching was slightly reduced. Cracks reduced but no change in dryness and discharge. Irritability slightly better but anxiety about health and fear of misfortune still persists. Stools – satisfactory, regular	<i>Sac lac</i> 30/TDS/2 weeks
17/08/2022	Skin itching – better. Cracks and dryness same. Discharge reduced. No irritability. No change in anxiety about disease and fear of misfortune. Stools – satisfactory, regular	<i>Graphites</i> 30/OD/3 days <i>Sac lac</i> 30/TDS/2 weeks
1/09/2022	Skin itching – better. Cracks and dryness reduced. Discharge occasionally appears. Sleep – improved. Anxiety slightly reduced.	<i>Sac lac</i> 30/TDS/2 weeks
14/09/2022	No marked improvement seen.	<i>Graphites</i> 200/1 dose/stat <i>Sac lac</i> 30/TDS/2 weeks
28/09/2022	Skin itching – better. Cracks and dryness markedly reduced. No discharge. Anxiety – negligible, patient started becoming hopeful. No other new complaints.	<i>Sac lac</i> 30/TDS/2 weeks
17/10/2022	Skin healed up. No itching, dryness and discharge. Anxiety – negligible. No other new complaints.	<i>Sac lac</i> 30/TDS/2 weeks (since all the complaints were relieved, only placebo was given for 2 weeks and treatment was stopped thereafter)



Figure 2: After treatment



**DISCUSSION**

This case report shows the effectiveness of homoeopathy in treatment of eczema. It also shows the importance of taking a complete case and prescription of constitutional medicine over therapeutic prescription. It also helps to confirm the symptoms written in Homoeopathic materia medica and Repertory, as the case was repertorised and consulted with Homoeopathic materia medica.

The lacunae in this case was absence of diagnosis through prick test and serum IgE levels but it was confirmed clinically and with the clinical history of skin lesion.

**CONCLUSION**

This case report confirms the effectiveness of Homoeopathic treatment in the cases of Eczema as well as the well established fact of effectiveness of Homoeopathy in skin diseases has been confirmed through this case report. It further proves the effectiveness of *Graphites* in cases of Eczema. It also shows that homoeopathic medicines can cure patients in the most rapid and gentle way. Consent of patient was obtained for writing the manuscript.

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