



Homoeopathic Approach for the Management of Dyshidrotic Eczema : A Case Report

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Abstract:

Dyshidrotic eczema, or pompholyx, manifests as small, itchy blisters on the hands and feet, causing redness, swelling, and skin peeling. While the precise cause remains unclear, stress and psychological factors are believed to be the contributors. This case centres on a 13-year-old male patient with a one-month history of hand itching, featuring papule-like eruptions on the dorsum of the hands specify which hand. Intense itching, worsening at night and alleviating with warm water, was observed. Constitutional and individualized homeopathic medicine formed the basis of this case study. Pulsatilla Pratensis 200C, was administered as a single morning dose before meals on an empty stomach, highlighted the significance of optimal absorption for effectiveness. The outcome was remarkable, showcasing a 90% improvement in dyshidrotic eczema of the hands. This instance underscores the efficacy of homeopathic medicine in reversing such conditions. The findings propose that personalized homeopathic treatment holds promise as an approach for individuals. This case emerges as a pivotal asset for advancing Homeopathic research, significantly contributing to refining dermatological care.

Key words: Dyshidrotic eczema, Homoeopathic management, Pulsatilla, Pompholyx

I. INTRODUCTION

Eczema is a polymorphic inflammatory reaction pattern of the skin involving the epidermis and dermis. The term 'eczema' literally means to 'boil over' (Greek)⁽¹⁾. The terms eczema and dermatitis are used interchangeably. Eczema describes a clinical and histological pattern, which can be acute or chronic and has several causes⁽²⁾ Eczema is an inflammatory skin reaction characterized histologically by spongiosis with varying degrees of acanthosis, and a superficial perivascular lympho-histiocytic infiltrate⁽³⁾. Dyshidrotic eczema is a skin condition that yields small, itchy blisters on the edges of the fingers, toes, palms, and soles of the feet. Although this condition is a less common form of eczema, it is twice as common in women as it is in men. In recent years, the pursuit of effective interventions to reverse dyshidrotic eczema has led to the exploration of various treatment modalities, including traditional and alternative approaches Homeopathy, among these methods, promises a homeopathic approach to health by stimulating the body's natural healing mechanisms. This case study delves into the clinical profile 13-years-old male patient who presented with Itch in the Hands and Fingers for 1 month. Notably, despite being an autoimmune condition, the administration of constitutional Homoeopathic Medicines.

This study efficacy of Homoeopathic intervention in reversing dyshidrotic eczema with particular attention to the use *pulsatilla pratensis* 200C as a therapeutic agent. This results of this intervention, leading to a remarkable 90% recovery of dyshidrotic eczema during follow-up underscore the potential of Homoeopathy as a valuable approach in addressing this dermatologist concern. By offering perspectives on the effective alleviation of dyshidrotic eczema through personalized Homeopathic remedies, this study adds to the expanding realm of insights in dermatological care. It provides encouragement to individuals in search of natural and comprehensive approaches to address cosmetic issues. Additionally, it prompts deeper exploration into the underlying mechanisms of Homeopathic interventions, potentially extending their applications to diverse health and well-being challenges. The Global Burden of Skin Disease study (2010) estimated that AD affects up to 230 million people worldwide with a higher prevalence in females and lower prevalence in older age groups. The Global Burden of Disease study reported that the prevalence of AD and disability-adjusted life years (DALYs) in adults have remained stable since 1990 till 2017⁽⁴⁾. The age-specific DALYs in 2017 showed a right-skewed distribution, with the highest DALYs between 1 and 5 years of age⁽⁵⁾. As per the International Study of Asthma and Allergies in Childhood (ISAAC), prevalence of AD in India (6–7 years: 2.7% and 13–14 years: 3.6%) was lower compared to the global estimates⁽⁶⁾. The condition is more common in hot weather. The peak age of onset is between 20 and 30 years of age⁽⁷⁾. Onset before 10 years of age is unusual⁽⁸⁾. The sex incidence is approximately equal⁽⁸⁾. case of a person with dyshidrotic eczema is given in the current research study.

Case presentation:

A 13-year-old male patient sought treatment for dyshidrotic eczema, which has been persisting for the past month. Since the condition presented with minimal symptoms, the prescribed medication was determined based on the patient's constitutional factors. The case details are provided below.

History of presenting illness:

The patient presented with a one-month history of itching in both hands and fingers, the etiology of which remains unknown. Additionally, there is peeling of the skin on the dorsum of the fingers, accompanied by eruptions on the dorsum of both hands. The patient reports papules-like eruptions with severe itching, leading to continuous scratching. After scratching, there is reddish discoloration, a burning sensation, and an irresistible urge to scratch. The itching is more pronounced during the night, aggravated after scratching, and alleviated by applying warm water. There is no history of bleeding, pustular discharge, or any offensive odor.

Table 1. Complete Symptom

LOCATION	SENSATION	MODALITIES	CONCOMITANT
<p><u>INTEGUMENTARY SYSTEM</u></p> <p style="text-align: center;">↓</p> <p><u>SKIN ON BOTH HANDS AND FINGERS</u></p>	<p>Peeling of skin Papules like eruptions</p> <p>Severe itching</p> <p>Itch with reddish discoloration couldn't resist scratching</p>	<p>AGG – During night, after scratching</p> <p>AMEL – Applying warm water</p>	NIL

Past history:

At the age of 5, the individual experienced Chickenpox, opted for natural treatment, and successfully recovered.

Personal History:

Born and brought up in Chennai Student, studying 8th standard Vaccinated, Normal Developmental mile stones Non-vegetarian. No history of surgery and accidents.

Family history:

No family history of hypertension, bronchial asthma, skin disease, diabetes mellitus, cancer.

Physical generals:

The individual exhibits a robust appetite and maintains a standard daily thirst level of approximately 1 liter. Notably, there is a particular fondness for spicy foods, and there are no specific aversions to any food types, except for an intolerance to potatoes. Urinary patterns are regular, with 3 to 4 occurrences during the day and 0 to 2 times at night. Stool frequency is normal, happening twice a day. The person experiences profuse sweating on the back of the head and enjoys about 6-7 hours of refreshing sleep each day, featuring dreams involving ghosts and being lost. Interestingly, there is a thermal preference for warmth, indicating a predisposition towards a "hot" constitutional temperament. These physical characteristics offer valuable insights into the individual's health profile.

Mental generals:

In terms of mental characteristics, the person exhibits a reserved and restless, noticeable in both behavior and thought patterns. Their lovable and calm nature may hint at a perfectionist tendency. Notably, there is an apprehension about the future, indicating heightened anxiety. The individual expresses a desire to be in the company of their mother and harbors fears related to darkness and ghosts, contributing to a predisposition to easily shed tears and display timidity. This psychological profile is likely to have an impact on the overall character of the individual.

Vital signs:

Assessing vital signs offers valuable information about an individual's health status. A body temperature of 98.8 °F reflects a normal and healthy temperature range. A respiratory rate of 18 breaths per minute indicates a well-regulated cardiovascular system with a moderate breathing pace. With a pulse rate of 68 beats per minute falling within the standard range, the individual demonstrates a reasonably typical heart rate. Despite potential mental health challenges, the collected vital signs provide reassurance regarding the person's overall physical well-being. It underscores the importance of considering both mental and physical aspects for a holistic understanding of health.

Provisional diagnosis:

Dyshidrotic eczema of hands.

Fig:1. Repertorial Chart

Remedies	ΣSym	ΣDeg	Symptoms
puls.	10	21	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
sep.	9	18	1, 2, 3, 4, 5, 6, 7, 8, 9
sil.	9	18	1, 2, 3, 4, 5, 6, 7, 8, 9
nat-m.	9	15	1, 2, 3, 4, 5, 6, 7, 8, 9
bell.	9	13	1, 2, 3, 4, 5, 6, 7, 8, 9
calc.	8	17	1, 2, 3, 4, 5, 6, 8, 9
caust.	8	16	1, 2, 3, 4, 5, 6, 8, 9

Prescription:

The prescription dated April 15, 2023, for how long recommends taking a single dose of Pulsatilla Pratensis 200C in the morning, before meals, following a specific diet and regimen of (1-0-0)(one dose in the morning). This homeopathic remedy, addressing both mental and physical and character particular symptoms, is often suggested for diverse manifestations such as skin issues and psychological traits like timidity and susceptibility to tears. The inclusion of "BF" (before meals) emphasizes the importance of administering the dose on an empty stomach for enhanced absorption and effectiveness in addressing the individual's symptoms.

Table 2.Follow up

Date	Symptoms	Prescription
Visit1: 30.04.23	Patient feels better after taking medicine Itching reduced, burning sensation present. Physical generals are good.	Rx 1. SACCHARUMLACTIS 1 dram(3-3-3)/AF
Visit2: 15.05.23	Patient feels better after taking medicine eruptions disappeared in the dorsum of hand. Burning sensation mildly present Physical generals are good	Rx 1. SACCHARUMLACTIS 1dram (3-3-3)/AF

RESULTS:

After undergoing treatment, the patient experienced substantial improvement, with a noteworthy 90% amelioration in the case of Dyshidrotic eczema affecting the hands. This positive outcome was credited to the administration of the Pulsatilla Pratensis medication..



Fig :2 Treatment Before and After



Fig 3: Treatment Before and After

CONCLUSION:

The 13-year-old patient, grappling with a month-long ordeal of persistent hands and finger itching accompanied by blister-like eruptions, received a tailored prescription derived from a thorough repertorization synthesis. Pulsatilla Pratensis 200C and saccharum lactis 1 dram were specifically recommended through a Synthesis repertorial approach, with clear instructions to administer the former in the early morning on an empty stomach and the latter as 3 pills after each meal. Comprehensive dietary and lifestyle adjustments were also advised. Witnessing improvements, saccharum lactis was reiterated in both the 1st follow-ups. Should the positive trend persist, contemplation of introducing Pulsatilla Pratensis in the 2nd follow-up is on the horizon. This case exemplifies a holistic and homeopathic care strategy, holding the potential to significantly enhance the overall well-being of the patient. The holistic nature of homeopathic treatment contributes to a harmonious balance between emotional and physical aspects, shaping the character of individual health.

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REFERENCES:

1. Das K. Textbook of Medicine. Jaypee, The Health Sciences Publisher; 2017.
2. Innes, J.A. (2020) Davidson's Essentials of Medicine. Edinburgh: Elsevier Limited.
3. DM Thappa. Essentials in Dermatology. Jaypee Brothers, Medical Publishers Pvt. Limited; 2013.

4. Barbarot S, Auziere S, Gadkari A, et al. Epidemiology of atopic dermatitis in adults: results from an international survey. *Allergy Eur J Allergy Clin Immunol*. 2018;73(6):1284–1293. doi:10.1111/all.13401.
5. <https://www.sciencedirect.com/science/article/pii/S2666328720300559>
6. Laughter MR, Maymone MBC, Mashayekhi S, et al. The global burden of atopic dermatitis: lessons from the Global Burden of Disease Study 1990–2017*. *Br J Dermatol*. 2021;184(2):304–309. doi:10.1111/bjd.19580.
7. Nezafati KA, Cruz P (2014) Dyshidrotic dermatitis. In: HeymanWR, Anderson BE, Hivnor C, et al, eds. *Clinical Decision Support: Dermatology*. Wilmington, Delaware: Decision Support in Medicine, LLC, electronic database.
8. Chen JJ, Liang YH, Zhou FS, Yang S, Wang J, et al. (2006) The gene for a rare autosomal dominant form of pompholyx maps to chromosome 18q22.1-18q22.3. *J Invest Dermatol* 126: 300-304.

