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**Study of efficacy of homoeopathic medicines in management of psoriasis cases treated after 2018: A retrospective study**

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**Abstract**

**Background:** Psoriasis is a common, chronic and non-infectious skin disease characterized by well-defined slightly raised, dry erythematous macules with silvery scales and typical extensor distribution. **Objective:** The effect of homoeopathic treatment in cases of psoriasis studied in age group 10-60 for 6 months. Prevalence of psoriasis in both males and females. **Design:** A Retrospective observational study. Psoriasis Area Severity Index scale (PASI) were used for evaluating cases. **Material and method:** 45 patients were selected for the present study on the basis of clinical sign and symptoms of psoriasis. To assess the cases improvement psoriasis area severity index scale were applied. The study include patient taking treatment from 2018. **Result:** Homeopathic medicine were found to reduce the PASI score in patient. **Conclusion:** Hence, homoeopathic medicine is effective in psoriasis when studied in age group 10- 60 in both sexes. Out of 45 cases 91% cases are improving, 6.66% cases are not improved and 2.2% cases are improved.

**Keywords:** Homeopathy, prevalence, psoriasis, Psoriasis AreaSeverity Index.

**Introduction**

Psoriasis is a common, chronic and non-infectious skin disease characterized by well-defined slightly raised, dry erythematous macules with silvery scales and typical extensor distribution. <sup>(1)</sup> Distribution includes extensor surfaces (i.e., knees, elbows, and buttocks); may also involve palms and scalp (particularly anterior scalp margin). Associated findings include psoriatic arthritis and nail changes (onycholysis, pitting or thickening of nail plate with accumulation of subungual debris) <sup>(9)</sup>

**Classification**

Guttate psoriasis Chronic plaque psoriasis (psoriasis vulgaris)

Exfoliative psoriasis (psoriatic erythroderma) Pustular psoriasis Generalized—Von-Zumbusch type Exanthematic type Annular

Type Localized pustular psoriasis Psoriasis unguis

Mucous membrane lesions in psoriasis

Psoriatic arthritis Classical type Rheumatoid type Arthritis mutilans Oligoarticular arthritis Psoriatic spondylitis

Follicular psoriasis Psoriasis verrucosa Linear psoriasis <sup>(2)</sup>

**Epidemiology**

Psoriasis is seen worldwide in all races and both sexes with a prevalence from 0.1% to 3%. Psoriasis can present at any age; bimodal distribution is common. first peak at 20 years to 30 years and second at 50 to 60 years. Winter aggravation is common. <sup>(2)</sup>

Psoriasis affects 1.5-3% of the population. Inheritance is polygenic: 35% have a family history. Geneticists have identified loci for possible psoriasis genes on chromosomes 4, 6 and 17. Peaks of onset are in the 2nd-3rd and the 6th decades. Epidermal cell proliferation rate is increased, but the epidermal turnover time is reduced. Presentation is variable: the chronic plaque form affecting the elbows, knees and scalp is the commonest. Potential precipitating factors include streptococcal infection, drugs, sunlight and psychological stress. Nail involvement is frequent and difficult to treat. <sup>(3)</sup>

#### Triggering factors

Triggering factors may be local or systemic and include trauma (Koebner phenomenon), season (worsens in winter), emotional stress, upper respiratory tract infections and drugs like beta-blockers, lithium and chloroquine. Withdrawal of systemic steroids can lead to precipitation of pustular psoriasis. In general sunlight is beneficial to psoriatic lesions but in a minority of patients, psoriasis can be exacerbated by sunlight. <sup>(12)</sup>

#### Description

The treatment of chronic skin diseases with homeopathic remedies appears to be safer and more satisfactory to the patient when compared with conventional medication, with improvement in quality of life and general health up to 2 years after start of the treatment. <sup>(18)</sup>

Homeopathy is a safe option for treating skin diseases as it treats without any side-effects. It does not suppress skin diseases by using local ointments or applicators but, treats the root cause of the skin problem. It also extends beyond the physical symptoms to address the underlying conditions of mental stress, anxiety and depression that may be seen in patients suffering from skin diseases. It offers long-term relief from skin diseases. <sup>(20)</sup>

#### Materials And Methods

##### Study design and study setting

A retrospective study was conducted at three outpatient departments on 45 patients suffering from psoriasis. Outpatient departments are as follows: Motiwala National Homoeopathic Medical Hospital, Dr. Suatna Gangurde Homoeopathic Clinic,

Saudagar's Homoeopathy Clinic.

##### Methodology

45 patients were selected for the present study on the basis of clinical signs and symptoms of psoriasis. Medicine was prescribed according to Repertorial totality and sensation Method. For the collection of cases Convenience sampling technique was used.

To assess the cases improvement psoriasis area severity index scale was applied. The study included patients taking treatment from 2018. Before enrolment, written informed consent was taken from all the physicians.

##### Inclusion And Exclusion Criteria

Volunteers between the age group of 10 to 60 years showing clinical presentation suggestive of psoriasis and both male and female were included in the study.

Volunteers suffering from skin disorders with infective aetiology and other skin lesions which are not a type of psoriasis, cases of malignancy, HIV positive patient and age group below 10 years and above 60 years were excluded from the study.

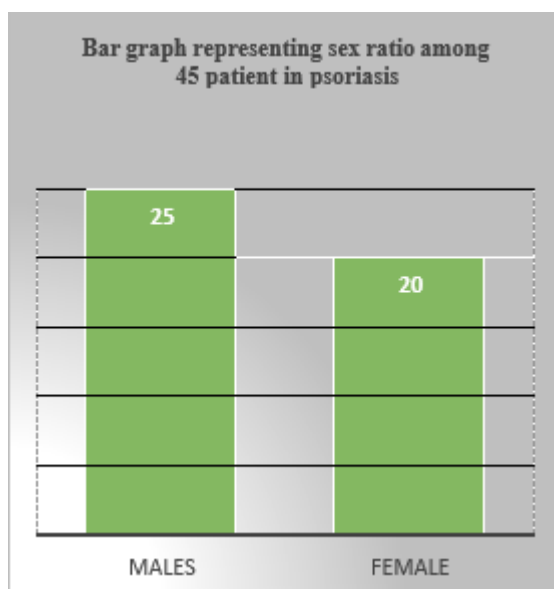
**Intervention And Follow Up**

All patient were given appropriate Homoeopathic medicine by doing repertorisation when needed and on the basis of sensation method. Follow ups were taken accordingly. Minimum 6 follow ups were recorded.

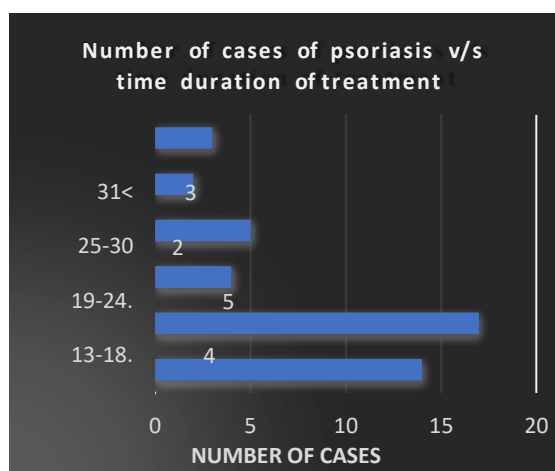
**Statistical Analysis**

Descriptive statistics were used for this study. To show male: female ratio [Figure1], Time duration of treatment [Figure 2] Bar graphs were used. For before and after values of PASI score Pie charts [Figure 3] were used.

t-test were used keeping  $P < 0.05$ . as a result, the calculated value for ‘t’ exceeds the tabulated ‘t’ value at  $p=0.05$  level with  $df = 44$ . Therefore, null hypothesis is rejected and hypothesis is accepted



**Figure 1: sex ratio**



**Figure 2: duration of treatment**

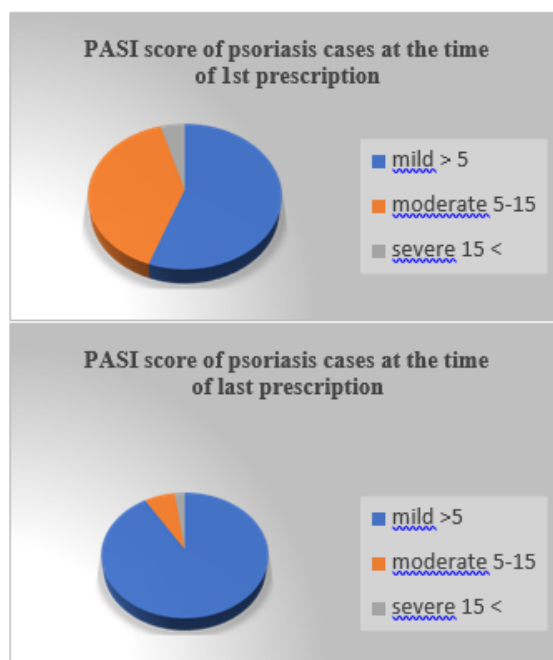


Figure 3: PASI Score before and after

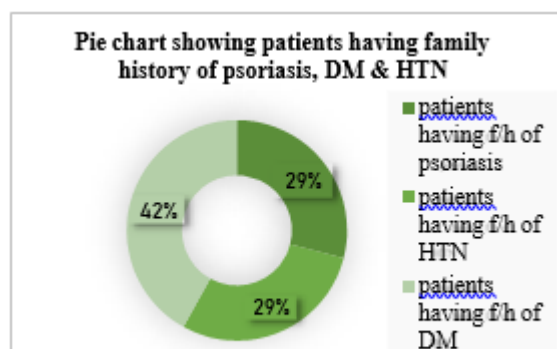


Figure 4: Family history

### Results

Out of 45 patients in this study, 8 patients were suspected to had occupational impact in the pathogenesis of Psoriasis, Gender wise distribution 25 cases were male and 20 were female.

14 patients were studied for the duration of less than 6 months, 17 patient for 7 to 12 months, 4 patients for 13-18 months, 5 patient for 19-24 months, 7

patients for 25-30 months and 3 patients for 25-30 Months. Maximum duration of case study was 2 years and 10 Months while Minimum duration was of 1 Month and 6 Days.

The study was carried out on Age group of 10 yearsto 60 years, in which 13 patients were in the age group of 10-20 years, 4 patients in the age group of 21-30 years, 11 patients in the age group of 30 to 40years, 6 patients in 41-to-50-year age group and 11 patients in the age group of 50 to 60 years.

Out of 45 cases, 29 patients shared family history [Figure 4] of Psoriasis, 42 patient shared family history of Diabetes and 29 patients shared family history of Hypertension, 2 cases shared family history of Cancer and 3 cases shared family history of Asthma. Out of 45 patients 4 patients were having Hypertension and only 1 patient was suffering fromdiabetes mellites.

While trying to study the etiological factors that may have been responsible for the pathogenesis of Psoriasis in this study, authors found 18 patients were susceptible to various Mental stimuli, ranging from financial stress to discord in family, 2 cases showed aggravation in winter while the other two patients were affected by heat stress, 1 case showed onset of symptom post first delivery.

Maximum indicated remedy [Figure 4] in this study was Lycopodium which was prescribed to 7 cases, Pulsatilla was prescribed to 5 cases, Natrum Muriaticum for 5 cases, Petroleum for 4 cases, Hyoscyamus for 3 cases, Nux Vomica for 3 cases, Graphites for 2 cases, Carcinocin for 2 cases, Bryonia for 2 cases, Calcarea carbonica for 2 cases, Lac Humanum for 2 cases, Saccharum Officinale for 2 cases, Phosphorus for 2 cases, Stramonium for 2 cases, Thuja for 2 cases, Lac Equinum for 2 cases. The homoeopathic remedies which were prescribed for at least one time were Kali sulphuricum, Medorrhinum, Anacardium, Chininum Sulphuricum, Leprominum, Excrementum can, Staphysagria, Crotalus Cascavella, Calcarea silicata, Magnesium Silicata, Lac felanum, Lac maternum, Gelsemium, Helonias, Argentum Nitricum, Naja, Crotalus Horridus, Coffea Cruda, Moschus, Lachesis and Platina.

AGE/SEX	AGE OF ONSET	DURATION OF TRETMENT (MONTH)	PASI SCORE BEFORE	PASI SCORE AFTER	MEDICINES PRESCRIBED
16/M	13 years	12	5	2.9	Natrum muriaticum, Graphites.
43/F	38Years.	22	2	4.8	Carcinocin, kali sulphuricum, Medorrhinum, Graphites, Bryonia alba, Natrum muriaticum, Lycopodium.
34/M	33Years.	5	4.8	2	Lycopodium
28/M	27Years.	12	4.8	0.6	Lycopodium
19/M	13Years.	28	9.7	1.2	Anacardium, Hyoscyamus.
17/M	13Years.	18	1	0.2	Chininum sulphuricum.
41/M	17Years.	6	7.8	2.2	Calcarea carbonica
33/M	17Years.	26	14	5.7	Calcarea Sulphuricum, Calcarea carbonica, Bryonia alba.
52/F	27Years.	7	9.5	4.7	Leprominum, Excrementum caninum
56/M	55Years.	3	3	1.7	Hyoscyamus
37/M	32Years.	34	2.5	0.2	Nux Vomica.
40/M	36Years.	9	11.3	3.9	Staphysagria.
42/M	22Years.	6	5.4	1.8	Lac humanum, Lycopodium.
39/M	30Years.	32	3.8	2.4	Saccharum Officinale, Nux Vomica
56/M	30Years.	18	3	0.4	Crotalus cascavella, Pulsatilla

AGE/SEX	AGE OF ONSET	DURATION OF TRETMENT (MONTH)	PASI SCORE BEFORE	PASI SCORE AFTER	MEDICINES PRESCRIBED
24/F	21Years.	5	4.2	2.8	calcareea silicata., magnesium Silicata.
15/M	13Years.	9	1.2	0.8	Phosphorus, Petroleum.
12/F	11Years.	18	3.1	2.1	Stramonium
39/F	27Years.	30	1.5	1	lac felanum.
11/M	11Years.	3	3.5	1.6	Stramonium, Hyoscyamus.
10/F	7 Years.	8	6.8	1.4	Lycopodium.
41/F	21Years.	15	32	20	calcareea carbonica
10/F	10Years.	11	1.8	0.2	Phosphorus, Pulsatilla, Thuja.
16/M	13 years	12	5	2.9	Natrum muriaticum, Graphites. Carcinocin, kali sulphuricum, Medorrhinum, Graphites, Bryonia alba, Natrum muriaticum, Lycopodium.
43/F	38Years.	22	2	4.8	
34/M	33Years.	5	4.8	2	Lycopodium
28/M	27Years.	12	4.8	0.6	Lycopodium
19/M	13Years.	28	9.7	1.2	Anacardium, Hyoscyamus.
17/M	13Years.	18	1	0.2	Chininum sulphuricum.
41/M	17Years.	6	7.8	2.2	Calcarea carbonica Calcarea Sulphuricum, Calcarea carbonica, Bryonia alba.
33/M	17Years.	26	14	5.7	
52/F	27Years.	7	9.5	4.7	Leprominium, Excrementum caninum
56/M	55Years.	3	3	1.7	Hyoscyamus
37/M	32Years.	34	2.5	0.2	Nux Vomica.
40/M	36Years.	9	11.3	3.9	Staphysagria.
42/M	22Years.	6	5.4	1.8	Lac humanum, Lycopodium.
39/M	30Years.	32	3.8	2.4	Saccharum Officinalis, Nux Vomica
56/M	30Years.	18	3	0.4	Crotalus cascavella, Pulsatilla
24/F	21Years.	5	4.2	2.8	calcareea silicata., magnesium Silicata.
15/M	13Years.	9	1.2	0.8	Phosphorus, Petroleum.
12/F	11Years.	18	3.1	2.1	Stramonium
39/F	27Years.	30	1.5	1	lac felanum.
11/M	11Years.	3	3.5	1.6	Stramonium, Hyoscyamus.
10/F	7 Years.	8	6.8	1.4	Lycopodium.
41/F	21Years.	15	32	20	calcareea carbonica
10/F	10Years.	11	1.8	0.2	Phosphorus, Pulsatilla, Thuja.

**Discussion**

The above study was carried out at the Out Patient Department of Motiwala (National) Homoeopathic Medical College, Out Patient Department of Dr. Suratna Gangurde and Out Patient Department of Dr. Vrushinit Saudagar, A total of 45 cases of Psoriasis were studied Retrospectively on Psoriasis Area and Severity Index.

After thorough case taking and case analysis based on the totality of symptoms, for prescription various approach were taken in consideration in prescribing homoeopathic medicines, including Sensation. Method. The final medicine was prescribed after studying the Repertorial totality and Potential differential field of that case. To prove the hypothesis, authors used t-test where standard deviation is 5.67, Standard error is 0.845, value of  $t$  is 5.159,  $df$  is 44 and confidence level is 0.05 as a result the calculated value for ' $t$ ' exceeds the tabulated ' $t$ ' value at  $p=0.05$  level with  $df = 44$ . Therefore, null hypothesis is rejected and hypothesis is accepted.

### **Conclusion**

Thus, by this study authors conclude that Homoeopathic treatment is effective for Psoriasis when studied in age group of 10 to 60 years in both sexes. Out of 45 cases 91% cases are improving, 6.66% cases are not improved and 2.2% cases are improved.

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### **Difficulty Faced Were**

As this is a retrospective study collecting all the data was challenging. Authors didn't get all the pictures of every cases. Cases were taken in past hence some data was not available. authors faced many difficulties gathering data to calculate PASI score, photographic data, detailed follow ups & by making telephonic communication authors gathered this data to calculate PASI score.

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