

Study of efficacy of Homoeopathic Medicines in Management of Psoriasis cases treated after 2018: a retrospective study.

Dr Anand Sunil Nikam

INTRODUCTION: -

Introduction It can start at any age but is rare under 10 years, and appears most often between 15 and 40 years. Its course is unpredictable but is usually chronic with exacerbations and remissions. (5)

Definition

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. (1)

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. (2) 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 2nd3rd and the 6th decades. Epidermal cell proliferation rate is increased, but the epidermal turnover time is reduced. H 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. (3)

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. (12)

Psoriasis: Key Diagnostic Points (3)

1. Erythematous scaly plaques
2. Well-defined border
3. Scales dry loose and micaceous
4. Koebner phenomenon seen
5. Auspitz sign positive
6. Regular, circular pits on nail plates
7. Involvement of distal interphalangeal joints of fingers and toes
8. Histopathological: Spongiform pustules of Kogoj

Conventional Management

Explanation, reassurance and instruction are vital. Patients may be very distressed by their appearance and doctors should be aware of the impact that psoriasis can have. Parents may admit that they cannot take their young children swimming because of the alarm their rash causes to other swimmers. (4) Topical Rx: usually the first approach is Steroids: popular but beware of side-effects. 1. Vitamin D analogues and tazarotene: clean, effective, free of steroid side-effects but may irritate; used with other treatments. 2. Coal tar. safe but messy and not

very popular. 3. Dithranol: effective, irritant, rather impractical for home use. 4. Keratolytics: useful for scalp involvement. Systemic Rx: For serious or severe psoriasis 1. PUVA: popular but long-term risk of skin cancer. 2. Retinoids: good for pustular psoriasis and as Re-PUVA; teratogenic. Methotrexate: a well-established systemic drug; hepatotoxic. 3. Ciclosporin: effective but potentially nephrotoxic. (3)

HOMOEOPATHIC APPROACH

1. 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. (18)
2. Homeopathy is a safe option for treating skin diseases as it treats without any side-effects. (20)
3. It treats associated complaints such as thyroid disorders and diabetes. (20)
4. It does not suppress skin diseases by using local ointments or applicators but, treats the root cause of the skin problem. (20)
5. 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. (20)
6. Therapeutics of Psoriasis: - Arsenic Album, Radium Bromatum, Thyroidinum, Cuprum Metallicum, Aethiops Antimonialis, Petroleum, Thuja, Mercurius Biniodatus, Chrysophanicum Acidum, Graphites, Cicuta Virosa, Sepia, Nit Acidum, Psorinum, Sulph, Bulb. Aqua. Dulcamara. (7)(8)
7. Cures take place in a definite, orderly manner and direction. Normal vital processes, cellular, organic and systemic, begin at the centre and proceed outwardly. Figuratively, if not literally, 'life is a centrifugal force, radiating, externalizing, concentrating and organizing spirit into matter - "from above, downward." In the same sense disease is a centripetal force, opposing, obstructing, penetrating toward the centre and tending to disorganization. The progression of all chronic diseases is from the surface toward the centre; from less important to more important organs "from below upward." Curative medicines reinforce the life force, reverse the morbid process and annihilate the disease. Symptoms, disappear from above downward, from within outward and in the reverse order of their appearance. When a patient with an obscure rheumatic endocarditis, for example, begins to have signs and symptoms of acute arthritis soon after taking the homeopathic remedy and is relieved of his chest sufferings, we know that cure has commenced. Cure takes place in much less time than natural recovery, without pain, physiological disturbance or danger from the use of the remedy employed and without sequel. The restoration of health is complete and lasting. (10)

CONCLUSION

By our study we 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.

BIBLIOGRAPHY: -

1. Bhel.P.N. N, Agrawal. A, Shrivastava.G. Practice of dermatology, CBS, Edition 10th, Page no.253- 268.
2. Shah and Sidharth, API Textbook of Medicine, 10th Edition, part 11
3. David J. Gawck Rodger, Dermatology an illustrated colour text, page no.26-29

4. Nicki R. Colledge, Brian R. Walker, Stuart h. Raston, Davidson's principle and practice of medicine, Edition 21, Chapter 27, pg. no. 1260-1265
5. J.A.A. Hunter, Clinical Dermatology, 3rd edition, pg. no-64
6. Robert.H.A. A, M.D. –The principles and art of cure by homeopathy ,3rd edition, chapter .no- 21, pg. - 178
7. John H. Clarke the prescriber a dictionary of the new therapeutics 3rd edition pg. 259,260
8. Samuel Lilienthal, Homoeopathic therapeutics the classical therapeutic hints, pg. no.910,670
9. Kasper, Fauci, Hauser, Longo, Jameson, Loscalzo, Harrison's Principles of Internal Medicine, 18th edition, volume 1, page no-367.
10. Dr Stuart M. CLOSE, The Genius of Homeopathy, Lectures and Essays on Homeopathic Philosophy, Chapter 9, pg. no-132
11. R Itamura, Effect of homeopathic treatment of 60 Japanese patients with chronic skin disease, National library of medicine
12. Preetha, Prasad, A Clinical Study on Papulosquamous Disorders in Children less than 12 Years. Master's thesis, Coimbatore Medical College, Coimbatore. 2015 pg. no 12
13. Dr. Uma, "Histomorphology of Papulosquamous Skin Lesions with Special Stain Application-An Analysis. M.G.R. Medical University, May 2018
14. Dr. Amutha Antony, Dr Karthika Sivaprakasam, An epidemiological study of 104 cases of papulosquamous disorders in south India research report, international journal of scientific research, January-2019.
15. Krishnendra Varma, Ujjwal Kumar, Varun Kumar Clinical pattern of papulosquamous dermatoses, international journal of research in dermatology.
16. S. D. Chavhan^{1*}, S. V. Mahajan² and A. J. Vankudre³, A Descriptive Study on Patients of Papulosquamous Lesion at Tertiary Care Institute, MVP journal of medical science.
17. Dr. Yogendra Bhadoriya HOMEOPATHIC MANAGEMENT OF PSORIASIS – A CASE STUDY
18. M.Jong, Homeopathic and conventional therapies for chronic skin diseases, European journal of integrative medicine Dec 2009.
19. Dr. mukesh Kumar Gautam, proved efficacy of homoeopathy in skin diseases.
20. [HTTPS://WWW.DRBATRAS.COM/ALL-SKIN-CONDITION](https://www.drbatras.com/all-skin-condition)
21. Article Title: Psoriasis Website Name: Encyclopaedia Britannica Publisher: Encyclopaedia Britannica, Inc. Date Published: 18 February 2021 URL: <https://www.britannica.com/science/psoriasis>
22. [HTTPS://WWW.BAD.ORG.UK/SHARED/GETFILE.ASHX?ITEMTYPE=DOCUMENT &ID=1654](https://www.bad.org.uk/shared/getfile.ashx?itemtype=document&id=1654)
23. Devinder Mohan Thappa & Malathi Munisamy: Research on psoriasis in India: Where do we stand? indian j med res. 2017 aug.
24. Seema Mahesh | Viraj Shah | Mahesh Mallappa | George Vithoukias – concluded that Psoriasis cases of same diagnosis but different phenotypes— Management through individualized homeopathic therapy.
25. Homeopathic treatment of patients with psoriasis – a prospective observational study with 2 years follow-up CM Witt, *† R Lütke, ‡ SN Willich†