

## **Case Report**

## **Marvellous Effect of Homoeopathic Management in Psoriasis**

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#### ABSTRACT

Psoriasis is a chronic autoimmune multisystemic illness or condition that causes the rapid buildup of skin cells .This builds up of skin cells causes scaling on the skins surface. Typical scales are whitish-silver and develop in thick, red patches. Sometimes, these patches will crack and bleed.

It is common, genetically determined, inflammatory and proliferative disease of the skin, most characteristics lesions consisting of chronic, sharply demarcated ,dull-red, scaly plaques ,particularly on the extensor prominences and in the scalp.

Psoriasis is Greek word *psora* meaning "itch"; psoriasis is a chronic, non-contagious disease. Psoriasis is a chronic, non-communicable, painful, disfiguring and disabling disease for which there is cure with great negative impact on patient's quality of life.

Keywords: Psoriasis, types, symptoms, homeopathic and general management



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### **Introduction:**

**Psoriasis** is a long-lasting autoimmune disease which is characterized by patches of abnormal skin. These skin patches are typically red, itchy, and scaly. Injury to the skin can trigger psoriatic skin changes at that spot, which is known as the Koebner phenomenon<sup>(2)</sup>.

"Psoriasis is an inflammatory disease that manifest most commonly as well as circumscribed, erythematous papules and plaques covered with silvery scales."Psoriasis causes cell to build up rapidly on the surface of the skin, it is a persistent, long lasting disease.

#### **INCIDENCE-**

Psoriasis is a common chronic inflammatory dermatosis affecting as many as 1-2% of people. Females tend to develop psoriasis earlier than males. evaluation of the age of onset revealed two peaks- an early one at 18-24 years, and a later one at 57-60 years<sup>(1)</sup>.

Psoriasis is a chronic disease; its course is punctuated by intermissions and remissions. This disease may last for few weeks to months and some cases years. Removal of scales usually causes bleeding points.It also have auspitz sign for diagnosis clinically.

There are five main types of psoriasis:

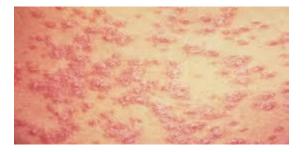
Plaque, guttate, inverse, pustular, and erythrodermic.

1. Plaque psoriasis, also known as psoriasis vulgaris, makes up about 90% of cases. Areas of the body most commonly affected are the back of the forearms, shins, around the navel, and the scalp.



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2. Guttate psoriasis has drop-shaped lesions.



3. Pustular psoriasis presents with small non-infectious pus-filled blisters.



4. Inverse psoriasis forms red patches in skin folds.



5. Erythrodermic psoriasis occurs when the rash becomes very widespread, and can develop from any of the other types<sub>4</sub> Fingernails and toenails are affected in most people at some point in time. This may include pits in the nails or changes in nail<sub>1</sub>. color.



# **Clinical features**

- 1. Dry, cracked may bleed red, shiny scaly papules with pustules
- 2. Red exfoliating macules, burning
- 3. Crustaceous lesions with thick and tough patches

4. Fine, silvery scale with well defined plaques

- 5. Sharp mental stress with physical injury
- 6. Rigid and swollen joints (3).

### Diagnosis

A complete medical history and clinical examination of the skin, nails, and scalp and autspiz sign are the basis for a diagnosis of psoriasis in some severe cases biopsy indicated.

# Differential diagnosis

- 1. Pustular eczema
- 2. Nummular eczema
- 3. Pilaris seborrheic dermatitis
- 4. Tinea syphillis

### Prevention

1. It can be prevented by reducing stress by psychotherapy, yoga, meditation <sup>(4)</sup>.

2. Avoid food that causes inflammation like red meat, dairy products, high fat food, processed foods, and refined sugars, nightshades, such as tomatoes, potatoes, and peppers, citrus fruits.

# Management

- 1. Reassuring the patient that psoriasis is not contagious.
- 2 .Educating patients about various treatments and how some can be difficult to use and how some may have adverse effects.

Provide general advice regarding the benefits of not smoking, avoiding excessive alcohol and maintaining optimal weight.

Use Of external application avoided like soaps, emollients, fragrance, perfumes which irritates patient's skin.

- Dietary supplements may help ease psoriasis symptoms from inside. Like fish oil, vitamin D, milk thistle, aloe Vera and evening primrose oil, flax seeds, nuts, almonds, walnuts, green leafy vegetables, like spinach and kale.
- 2. Avoid precipitating or trigger factors, avoid food you are allergic to, Avoid smoking, alcohol, Avoid foods high in fat or sugar, Avoid non-vegetarian food-meat poultry.

3. Do regular exercise helps by improving blood circulation,Practice yoga will help in reducing stress,warmth may help to control relapses.

4. Drink plenty of water,eat fresh and raw fruits ang vegetables they provide antioxidents and flavanoids which which help in reducing inflammation and boosting up immunity.

5. Consume gluten free diet,consume food rich in omega 3.

Complications

1. If you have psoriasis, you're at greater risk of developing certain diseases.These include: Psoriatic arthritis.This complication of psoriasis can cause joint damage and a loss of function in some joints which can be debilitating.

2. Eye conditions: Certain eye disorders-such as conjunctivitis, bipharitis and uvetis-are common in people with psoriasis.

3. Obesity- People with psoriasis especially those with more severe disease are more likely to be obese.

4. Parkinsons disease- This chronic neurological condition is more likely to occur in people with psoriasis.

5. High blood pressure ,the odds of having high blood pressure are higher for people with psoriasis.

6. Cardio vascular-for people with psoriasis, the risk of heart attack is almost three times greater than for those without the disease.

7. Type 2 diabetes: The risk of type 2 diabetes is upped in people with psoriasis. The more severe the psoriasis, the greater the likelihood of type 2 diabetes.

Risk factors-

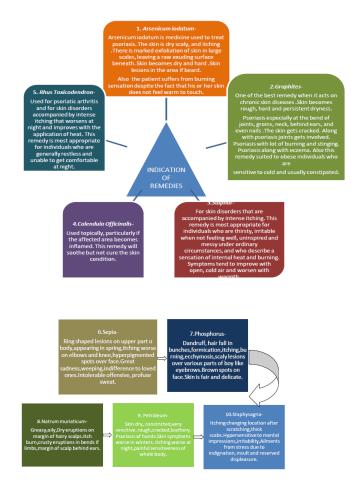
Anyone can develop psoriasis ,but these factors can your risk developing the disease. Family history:Perhaps the most significant riskfactor for psoriasis increases your risk of getting the disease and having two parents with psoriasis increases your risk even more. **Homoeopathic management** 

Case 1-

Life space-

Appearance

very lean thin lady wearing a simple saree, who had a tensed look on her face, Childhood Basically Pt. is from B district her childhood went with her parents and two elder sisters. Her father was a farmer and had a drinking habit, and mother was a house wife. Economically -stable.



### Education

Pt. studied till 10<sup>th</sup> and was sharp in studies. At home and even in school she was a timid child.

school life - few friends

never participated in any of her school functions

very afraid of school and school teachers as they use to shout.

in class she was very quite student but was sharp in studies

whenever teacher asked any questions in class, even though she knew answer, never used to reply.

Pt. score 75 % in  $10^{\text{th}}$  std.

parents - fulfill all her needs but was always under a pressure.

Childhood nature - She never used to go alone anywhere as her parents did not like. Parents had objections if she speak with anybody outside or laugh loudly with anyone, so she never went against her parents. Pt. also mentioned that her parents never scolded her or hit her they had just mentioned the things which they don't like. Till 10<sup>th</sup> std. Pt. used to go with her mother to purchase her dresses and even the small thing, help her mother in household works.

Fear of dark3, alone when3 and animals2 esp lizards2 and dog2

Marriage after

Pt. got married at the age of sixteen, after completion of the 10<sup>th</sup> std. Here she had joint family where she leaved with in-laws and elder BIL. Pt. said that her elder SIL would look after everything. Pt. used to do household things before anyone telling her. She had no tensions that time as SIL was looking after everything. She even mention her Husband to be very irresponsible, who never helped his brother in work nor looked after his own children's but only wanted nice things to eat, She would get angry on him and said he should have the same food prepared for all the members of the family. Pt. said that she never had any economical tension, how to manage, what thing to get and what not, as SIL used to manage the whole things and SIL used to get everything for her, and even if Pt. wanted a saree her SIL would get for her, Pt. was happy as she never had to go out of her home, but even was under pressure always and would do the thing before anyone tell. Pt. would cry if anyone shouts on her or scold her. Pt. has two daughters.

Second pregnancy

when she had gone to her maiden, that time her husband got separated from the family which when Pt. came to know was very shocking for her and within twenty days of her delivery she had to come back to husband, that time she was in tension as she will have to manage all the things by her own. She even had economical tensions and how to manage all the thing, but even felt it was her husband's mistake because of which they got separated as he never worked responsibly. Pt. felt her in-laws and BIL should not have done this so she felt very bad that time but never communicated with her husband. Onset of illness

After two months of separation she started with the complains of dandruff in scalp, latter she started stitching dresses which help her a lot.

Work and society

Pt. mentioned that because of her tailoring work, many ladies comes to her house, Pt. also likes to go their home even like to talk with them but gets afraid of her in-laws and BIL, thinking that what if they see her talking or roaming, they will scold or shout on her so she never goes out.

Present state

Pt. Said now she has to look after her two daughters and their future and feel that her husband should also look after them and their studies. Feels he should go to their school and should ask about their progress in studies.

### **Observation:**

During interview Pt. continuously looked outside the cabin is someone there and had to relax pt. by telling no one can hear you out. **Chief complaints** 

Chief	comp	laint	S
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Location	Sensation	Modality
Concomitant, skin	White scaly	A/F
:since 3 yrs	eruptions:3	
.Anticipation/insecurit	+ sleep	
y?	Disturbed	
Startedscalp	Itching 3+	<daytime3+< td=""></daytime3+<>
Appetite:Decreased		
Sudden onset:		<tension 3+<="" td=""></tension>
Irritability increased		<heat2+< td=""></heat2+<>
2+ since 5-6 months	Bloody	
	Discharge3	
	+	
	Offensive	
	smell2+	
Elbow joint :since 2/3		>washing3+
months		<scratching2< td=""></scratching2<>
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Back since 2/3 months	Eruptions+	
Ear, shoulders, Ankle	Itching3+	
joints:since 1 month	No burning	

Patient as a person:

Appearance: Lean ,Thin ,Anxious look Wound: Delayed Healing. Suppuration:++ Sweat: Profuse, forehead 3+,Palms 3+ Appetite/thirst: Decreased/ Thirstless Craving: Rice 3+,Pulses2+,milk 3+ Stool/Urine: Normal

Menses:FMP-16 Years Menses-Reg.cycle/30 Days/2 Days. Quantity:Medium <heavy work. Concomittent :Backache<during menses Staining: Delible, Sexual functions: Desire decreased since 1 vear. **Obstretic History:** Pregnancy:4 Delivery: **FTND** 1<sup>st</sup> 1.5month, 2<sup>nd</sup> 2 Abortions: Induced month Sleep: Disturbed talking during sleep Dreams: FRIGHTFUL2 Sun<UTI, Burning micturition Reactions-Physical Factors: Bus: Nausea 2+, vomiting occ Thermal: Fan Rainy:1 Chadder Woolen: Bath: Summer winter++ Scarf:++ Sweater: ++ chilly Past History: Appendicites--2yrs back-- $\rightarrow$  Allopathic treatment. Family History; NAD **Physical Examination:** G/E:Pulse-80/min, pallor:+ S/E: RS-NAD, P/A-NAD, CVS-NAD. Skin :White scaling++, itching++ Prescription:

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Mind		Physical							
A/F	ANXIETY	Appearance	e: Lean						
ANTICI	PATORY	,Thin ,Anxious look							
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DEPENI	DANCY3	Suppuration:++							
		Sweat:	Profuse,						
ANXIET	Y FUTURE	forehead	3+,Palms						
ANXIET	Ϋ́	3+							
CHILDR	EN ABOUT	Appetite/th	irst:						
Fear of d	ark3,	Decreased/							
alone wh	en3 and	Thirstless							
animals2	esp lizards2	Craving:	Rice						
and dog2		3+,Pulses2-	+,milk 3+						
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C] [Mind]Anxiety:Future, about:								÷	H	븜	H	片	
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