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# Vitiligo treated by Homoeopathic Individualised Medicine - A Case Report

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#### **Abstract**

**Background-** The autoimmune skin condition vitiligo is typified by white areas of skin that have lost their ability to produce melanocytes, the skin's pigment-producing cells.

**Method-** In accordance with the HOM-CASE standards, a vitiligo case is treated by few doses of individualised homoeopathic medicine ,Phosphorus

**Result-** There are no negative side effects and the vitiligo patches showed marked improvement. Photographic evidences were used to evaluate the result..

**Conclusion-** The effectiveness of individualised homoeopathic prescription has been repeatedly demonstrated by this case study. According to this case study, individualised homoeopathic interventions for vitiligo sufferers should be tested in rigorous clinical trials, particularly Randomised Controlled Trials (RCT).

**Keywords-** Vitiligo, Phosphorus, individualised medicine, Homoeopathy

# Introduction

Vitiligo is a prevalent skin condition that is gender-neutral and has an incidence rate of 0.1% to 2% worldwide. Patients with vitiligo are more susceptible to sunburn and skin cancer, and their quality of life and self-esteem are significantly impacted. Vitiligo is a complex illness that involves multiple factors, including autoimmune reactions, environmental triggers that cause the production of inflammatory mediators, and hereditary vulnerability.<sup>1</sup>

The few treatments for vitiligo that are currently available rely on nonspecific therapies that target the immune and inflammatory systems. Examples of these therapies include topical calcineurin inhibitors and systemic

steroids, both of which work by interacting with ultraviolet (UV) light to promote melanocyte regeneration. This restriction on available treatments emphasizes the need for better vitiligo management.<sup>2</sup>

Further research is necessary to establish evidence for the effective treatment of vitiligo, as no therapy trial has yet demonstrated long-term benefits utilizing these criteria. The effectiveness of classical homeopathic treatment for vitiligo has been studied in at least one prospective observational clinical study. Another prospective observational clinical study involved the administration of homeopathic treatments based on the unique symptoms of each patient. To our knowledge, nevertheless, we have just now documented a case that details the long-term results of treating vitiligo using homeopathy.<sup>3</sup>

# **Case Report**

### **Presenting Complaint**

A 46 year old female presented with hypopigmented patches on forehead, above borh eyebrows and under right lower lid since 6 years. Patient also complained of pain in abdomen on and off after eating since 2 weeks.

# **History of Presenting Complaint**

It started with a small patch on left side of forehead then under right eyelid, above right eyebrow, above left eyebrow, right side of forehead. She also took conventional medicines for 5 years but there was no relief.

# **Past History**

Jaundice 10 years before

#### **Family History**

Mother – Hypertension

Younger Sister – Vitiligo

# **Physical Generals**

Appetite-Normal, 3chapati/meal, 2 meals/day

Thirst- Normal, 4-5 Litres / day, 1 glass at a time

Desire-Cold food

Intolerance - Coffee

Stool-Constipation, once in 2 days, semi solid

Urine- D<sub>4-5</sub>N<sub>0-1</sub>, pale yellow, non offensive

Sweat- Generalised, Non offensive, Non staining

Tongue – Clean and moist

Thermal- Chilly

**Mental Generals-** Patient suffers from fear of being alone since childhood. Patient told that she predicts any mishappening before it is going to happen and her daughter also reconfirmed this multiple times.

# **Analysis and Evaluation of Symptoms**

Table 1

Mental Generals	Physical Generals	Particulars
Fear of being alone 3+	Desire- Cold Food3+	Hypopigmented patches on
		forehead, above eyebrows
		and under right eye 1+
Predicts mishappening before	Intolerance- Coffee 2+	Pain in abdomen after eating
it is going to happen 2+		1+
	Stool – constipation, once in	
	2 days 2+	

**Repertorisation-** As the generals were marked, this case was repertorised with the help of the *Synthesis* Repertory from RADAR 10.0 version. <sup>4</sup>(Figure 1)

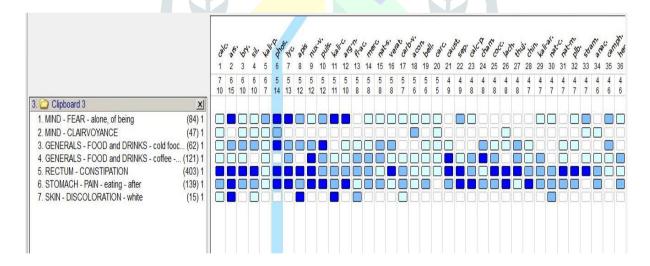


Figure 1

Considering the totality and after consulting Materia Medica and miasmatic analysis, *Phosphorus* was selected and prescribed in 200C potency.

**Selection of potency and dose** - 1 dose of *Phosphorus* 200, 4 globules at a time was prescribed.

**20/06/23**: *Phosphorus* 200/1 dose, Rubrum 30/TDS for 14 days. (Figure 2, Figure 3)

**General management -** Patient was advised to avoid any kind of local application to hypopigmented areas.

# Follow ups

Table 2

Date	Changes in symptoms	Prescription
05/07/2023	Reduced episode and intensity	Phytum 200/ 1 dose Rubrum
	of pain in abdomen.No changes	30/ TDS X 14 days
	in hypopigmented patches.	
19/07/2023	1 episode of pain in abdomen.	Phosphorus 200 / 1 dose
	No improvement in patches.	Rubrum 30 / TDS
		X 14 days
02/08/2023	Mild pigmentation appeared in	Phytum 200/ 1 dose Rubrum
	patches. Satisfactory stools.	30/ TDS X 1 month
1	(Figure 4)	
03/09/2023	Almost 80% pigmentation	Phytum 200/ 1 dose Rubrum
	appeared. All generals were	30/ TDS X 1 month.
	good. (Figure 5)	
04/10/23	Marked improvement in all	Phytum 200/ 1 dose Rubrum
	patches.( Figure 6, Figure 7)	30/ TDS X 1 month.
	(34)	





Figure 2

Figure 3

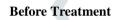






Figure 4 Figure 5

#### **During Treatment**





Figure 6

Figure 7

#### **After Treatment**

# **Discussion and Conclusion**

In this case of vitiligo, homoeopathic medicine, which was chosen based on homoeopathic principles, proved to be incredibly effective. Considering the homoeopathic philosophy and materia medica, Phosphorus was chosen based on the physical generals and case specifics. The course of treatment lasted for four months. Very few doses of the medication was administered, and they seemed to be rather efficient in treating the situation. Potency was chosen based on the patient's sensitivity and the disease's organic state.

In terms of the patient's psychological well-being, pigmentation in the impacted areas is crucial.<sup>5</sup> It was noted that combination therapy typically had superior outcomes for vitiligo; yet, in this instance, a notable improvement with a single medication is noteworthy.<sup>6</sup>The patient in this instance had the exact identical outcomes as mentioned above while taking a single medication, namely Phosphorus. It follows that there is potential for treating vitiligo with homoeopathy through constitutional prescribing or based on the patient's symptoms being repertorized.

Conflict of Interest: NIL

Source of funding: NIL

# **References:**

- 1.Chang WL, Lee WR, Kuo YC, Huang YH. Vitiligo: An Autoimmune Skin Disease and its Immunomodulatory Therapeutic Intervention. Frontiers in Cell and Developmental Biology [Internet]. 2021 Dec 14 [cited 2023 Dec 1];9. Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8712646/
- 2.Migayron L, Boniface K, Seneschal J. Vitiligo, From Physiopathology to Emerging Treatments: A Review. Dermatology and Therapy. 2020 Sep 19;10(6):1185–98.
- **3.** Mahesh S, Mallappa M, Tsintzas D, Vithoulkas G. Homeopathic Treatment of Vitiligo: A Report of Fourteen Cases. American Journal of Case Reports. 2017 Dec 2;18:1276–83.
- **4.** RADAR [computer program]. Version 10.0. London: Archibel Homeopathic software.
- 5. Dewan D, Taneja D, Singh U, Mittal R, Khurana A. Homoeopathic research in Vitiligo: Current scenario. Indian J Res Homoeopath. 2017 11(4): 226.
- 6. Sarveswari KN. Cosmetic camouflage in Vitiligo. Indian J Dermatol 2010;55: 211-214.

