A case report: Vitiligo treated by homoeopathy

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Abstract
Discussing case of a 50yrs old woman having white discolouration on her face with itching treated at personal clinic with individualised homoeopathic medicine. When the patient came for consultation, she was presented with white coloured patches on forehead, around mouth with itching with associated symptoms of abdominal discomfort. The case was repertorised after systematic case taking and making the totality of symptoms form the characteristic symptoms of the patient using synthesis repertory on Radar software to select the simillimum of the case, in which we got few homoeopathic remedies including Lycopodium, Sulphur, Phosphorus, Graphitis, China and others.

Keywords: Vitiligo [12], Lycopodium [14], homoeopathy

Introduction
Vitiligo, a common depigmenting skin disorder, has an estimated prevalence of 0.5–2% of the population worldwide. The disease is characterized by the selective loss of melanocytes which results in typical nonscaly, chalky-white macules. In recent years, considerable progress has been made in our understanding of the pathogenesis of Vitiligo which is now clearly classified as an autoimmune disease. Vitiligo is often dismissed as a cosmetic problem, although its effects can be psychologically devastating, often with a considerable burden on daily life. In 2011, an international consensus classified segmental Vitiligo separately from all other forms of Vitiligo, and the term Vitiligo was defined to designate all forms of nonsegmental Vitiligo [1].

Vitiligo is a depigmenting skin disorder, characterized by the selective loss of melanocytes, which in turn leads to pigment dilution in the affected areas of the skin. The characteristic lesion is a totally amelanotic, nonscaly, chalky-white macule with distinct margins. Considerable recent progress has been made in our understanding of the pathogenesis of Vitiligo, and it is now clearly classified as autoimmune disease, associated with genetic and environmental factors together with metabolic, oxidative stress and cell detachment abnormalities [2,3]. Vitiligo should not be dismissed as a cosmetic or insignificant disease, as its effects can be psychologically devastating, often with a considerable burden on daily life [4].

Case Study
This is case of a 50yr old woman having white discoloured patches on face and since 3yrs associated with itching sensation which gets ameliorated in open air. Started insidiously on the right side first on the right side and then moved to left side of the face. Fullness of abdomen was also present for 8 months which gets worse after eating and gets better after passing flatus.

Presenting Complaints
- White discoloured patches on face since 3yrs
- Location: on upper and lower lips, above the lips, forehead (worse on left side)
- Sensation: Itching
- Modalities: Agg- Nothing Significant
- Amel- open air
- Fullness of abdomen for 8 months
- Modalities: Agg- after little eating
- Amel- after passing flatus
Physical Generals
- Appetite: Increased, regular, easy satiety
- Thirst: Thirst less
- Desire: Sweets
- Aversion: Nothing Significant
- Intolerance: Fatty food causes indigestion
- Stool: Satisfactory, D/N
- Urine: regular, clear, non-offensive
- Sleep: 6-7hrs, Refreshing

Mental Generals
- Impulsive, do her work in a hurry
- Memory weak,
- Confused, lack of confidence
- Do not able to speak in gatherings
- Desires company

Perspiration: Generalised, non-staining, non-offensive
Tongue: Clean and moist

Table 1: Analysis and Evaluation of Symptoms

| Symptoms | Physical Generals | Mental Generals | Particulars |
|----------|------------------|----------------|-------------|
| 1        | Increased appetite with easy satiety** | Impulsive, do her work in a hurry** | White discoloured patches on face*** |
| 2        | Desire for sweets** | Weak memory* | Worse on left side* |
| 3        | Intolerance from fatty food causes indigestion** | Confused, lack of confidence** | Itching sensation in the patches** |
| 4        | Complaints generally aggravated between 4-8 pm | Does not able to speak in gatherings** | Itching gets better in open air** |
| 5        |                          |                          | Fullness of abdomen |
|          |                          |                          | Agg: little eating** |
|          |                          |                          | Amel: passing of flatus |

Table 2: Follow up Date-wise description of medicine

| Date       | Symptoms                                                                 | Medicine prescribed                  |
|------------|--------------------------------------------------------------------------|--------------------------------------|
| 10-06-2019 | Ist visit of the patient                                                | Lycopodium 30 / 3 dose               |
|            |                                                                          | Rubrum met 30/ 15 days               |
| 25-06-2019 | No change in the presenting complaints                                  | Rubrum met 30/ 15 days               |
| 10-07-2019 | Slight improvement in itching in the white patches with fullness of abdomen | Rubrum met 30/ 15 days               |
| 25-07-2019 | No change seen in white patches                                         | Lycopodium 30 / 3 dose               |
| 10-08-2019 | Slight decrease in the white patches on forehead                        | Rubrum met 30/ 15 days               |
| 25-08-2019 | Improvement in white discoloration around mouth                         | Rubrum met 30/ 15 days               |
| 10-09-2019 | Improvement in itching and white discoloration                          | Rubrum met 30/ 15 days               |
| 25-09-2019 | Further improvement in white discoloration                               | Rubrum met 30/ 15 days               |
| 10-10-2019 | No further white patches left                                           | Rubrum met 30/ 15 days               |
Homoeopathic medicine selected on the basis of homoeopathic principles proved to be very effective in this case of Vitiligo and shown remarkable results in the treatment. Lycopodium was selected on the basis of physical generals and particulars of the case keeping in mind the materia medica and homoeopathic philosophy. Treatment was continued for 5 months. Medicine was given in very few doses which appeared very effective in treatment of the case.

The potency selection was done on the basis of susceptibility of the patient as stated by Dr Close:

1. The greater the characteristic symptoms of the drug in the case, the greater the susceptibility to the remedy and the higher the potency required.
2. Age: medium and higher potencies for children
3. Higher potencies for sensitive, intelligent persons.
4. Higher potencies for persons of intellectual or sedentary occupation and those exposed to excitement or to the continual influence of drugs.
5. In terminal conditions even the crude drugs may be required.

He also writes “Different potencies act differently in different cases and individuals at different times under different conditions. All may be needed. No one potency, high or low, will meet the requirement of all cases at all times.”

Potency was selected on the basis of susceptibility of the patient and organic condition of the disease, the susceptibility of the patient was low so 30 potency was selected.

This case of Vitiligo re-established the strength of homoeopathy and proves the homoeopathic principles and philosophy as stated by Dr Hahnemann. It also elicited that homoeopathy can cure such type of chronic diseases in a very few doses in a very short period of time without any aggravation and side effects.

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