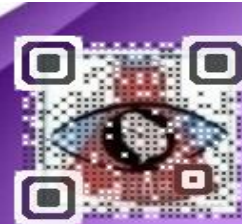


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ROLE OF HOMOEOPATHIC CONSTITUTIONAL MEDICINES IN THE TREATMENT OF CASES OF VITILIGO

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ADARSH COMPLEX, LGF - 69, 70, 79, 80, 81

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ABSTRACT

A total of 100 well diagnosed cases of Vitiligo were registered for treatment from October 2016 to October 2018. Clinical diagnosis followed by constitutional treatment with homoeopathic medicines showed amazing results in majority of cases. Out of 100 cases 25 cases showed complete repigmentation of all the white patches while 29 cases showed much improvement in few patches and rest 29 cases did not show any response to the treatment. 17 cases worsened after treatment in which increment in size and number of white patches was observed. Duration of treatment varied from case to case depending on the size and number of the white patches and response of the patient. In depth case taking was done in each and every case on holistic principle giving more emphasis on causation and mental symptoms. The outcome of this study is very encouraging which gives new dimensions and confidence to young

Homoeopaths in the treatment of Vitiligo by Hahnemannian principles of minimum dose and minimum repetition

KEYWORDS

**Vitiligo, Leucoderma, Constitutional
Medicines, Melanocytes, Homoeopathy,
Psycho-somatic.**

OBJECTIVES

- To ascertain the efficacy of homoeopathic constitutional medicines in the treatment of Vitiligo.
- Homoeopathic drugs have definite action on melanocytic cells which starts reproducing melanin resulting in repigmentation in white spots.
- To produce photographic evidence and to prepare a data base in the treatment of Vitiligo.
- To ascertain that the recurrence of Vitiligo nil or very less when treated by Homoeopathic constitutional medicines on the basis of Holistic Hahnemannian Principles.

MATERIAL METHODS

- Patients- Hundred (100) patients of well diagnosed cases of Vitiligo where enrolled from October 2016 to October 2018. All the cases were assessed clinically by pre and post treatment photographs.
- Repertorization – all cases were repertorised using RADAR Software.
- Analysis and Evaluation was done in each and every case considering the totality of symptoms according to Holistic Principles of Homoeopathy.
- Selection of medicine was done strictly on the basis of Totality of symptoms by proper analysis and evaluation of each and every case.

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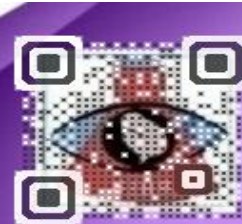


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- Dosage and Potency of the medicine was decided on the basis of Susceptibility of each and every individual case.
- Outcome assessment was decided on the basis of photographic evidence of Pre and post treatment photographs.

INTRODUCTION

Vitiligo Skin is made up of many layers. Skin is the largest organ of the body. It protects, maintains the temperature balance, releases out the toxins out of the body in the form of sweat and maintains the equilibrium. It reflects the internal and general health of the person. Skin cell contains Melanin, a dark pigment that gives the Color to the Skin and protects it from the strong rays of the Sun that are particularly harmful.

Vitiligo is a condition that causes depigmentation of parts of skin. It occurs when melanocytes, the cells responsible for skin pigmentation, die or are unable to function. The cause of vitiligo is unknown, but research suggests that it may arise from autoimmune, genetic, stress or viral causes. The incidence worldwide is less than 1%. The most common form is non-segmental vitiligo, which tends to appear in symmetric patches, sometimes over large areas of the body.

Homoeopathy is a scientific system of medicine based on "Similia Similibus Curenture" discovered by Dr C.F.S Hahnemann, a German physician who brought this theory into therapy, from pages to the practice.

Law of Similia i.e. Homoeopathy proved its efficacy on treating various diseases of the human population. According to homoeopathic philosophy vitiligo is not just a skin disease but it is the external manifestation of the internal derangement of the body. Thus, the treatment in homeopathy is aimed at curing this internal problem because only this would provide permanent relief from white patches. The patient

is thus evaluated from different angles – physical, emotional, mental and familial this is called Individualization of the patient which is done on the basis of Constitution of the Patient, which includes the Physical and mental make-up of a person, his likes desires and aversions etc. In Homoeopathy this very constitution of the person which is individualistic

in nature is utilized to find the similimum of the patient Vitiligo patch may start as a small white colored almost milky patch that keeps on increasing in varying size and shapes. Patches are usually uniform in color with well-demarcated edges. It may occur anywhere on the body or all over the body but still the commonest sites are around lips, on cheeks, bilaterally distributed on legs, hands, fingers, chest or back around the eyes and even on the head. A single white strand of hair could be the first sign of vitiligo on the scalp. Few patients have these patches around or over the joints like elbow, knee etc. As such patient of Vitiligo does not have any problem or symptoms like Itching, Pain, Discharge etc. whatsoever but still the patient seek treatment for cosmetic reasons.

Though the exact cause of Vitiligo is not known to the medical world still Stress, and General Low Immunity level are considered certain precipitating factors for this ailment. Vitiligo may also be hereditary that is, it can run in families. Children whose parents have the disorder are more likely to develop vitiligo. In fact, 30 percent of people with vitiligo have a family member with the disease. However, only 5 to 7 percent of children will get vitiligo even if a parent has it, and most people with vitiligo do not have a family history of the disorder.

Precipitating Factors: -

- Emotional Crisis - Death in family, Loss of job, Sudden shock etc. Acute Stress may be followed by fast spreading type of vitiligo proving the

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theory of Troponurosis. Emotional crisis may be an additional factor.

- Gastro intestinal tract disorders like Worms, Jaundice, amoebiasis etc.
- Prolonged use of Drugs, antibiotics, Oral an ovulating agents etc.
- Local causes like trauma, burns exposure to chemicals etc.
- Pathologically: - A defect in enzyme Tyrosinase is held responsible for vitiligo. According to some Dermatologists, it is a Trophoneurosis and Melatonin, a substance secreted at nerve endings inhibits Tyrosinase, thus interfering in pigment formation.
- An Endocrinal disorder may be operative; Diabetes, Pernicious anaemia, Thyrotoxicosis, Myxoedema, and Addison's disease may be associated with vitiligo.
- Trauma or Local irritations caused by wearing the sari or Trousers too tightly do produce vitiligo in individuals predisposed to it.

Prevalence & Incidence

Vitiligo the depigmentation disorder is wide spread in India and has higher percentage than in Western countries. Because of its disfiguring presentation, it gives rise to severe Psychological strain and Social Stigma. The Occurrence of Vitiligo is Stress related is about 42%, Hereditary 28% and Worms infested 30%.

About 0.5 to 1 percent of the world's population, or as many as 65 million people, have vitiligo. Half the people who have vitiligo develop it before age 20. Most develop it before 40 years of age. The disorder affects both sexes and all races equal; however it is more noticeable in people with dark skin.

Globally about 1% of people are affected by vitiligo. Some populations have rates as high as 2-3%.^[4] Males and females are equally affected. About half show the disorder before age 20 and

most develop it before age 40(14). Vitiligo has been described since ancient history.

Stable type of vitiligo was common which accounted for 65.21%. Lower lip was involved in 75% of mucosal vitiligo. Lower limbs were the most common site of onset of vitiligo.

Vitiligo seems to be somewhat more common in people with certain autoimmune diseases, including hyperthyroidism, adrenocortical insufficiency, alopecia areata, and pernicious anemia etc.

Hypothesis of Vitiligo

Though the etiology of vitiligo is obscure, various hypothesis are suggestive of its genesis. Among these the important ones are: -

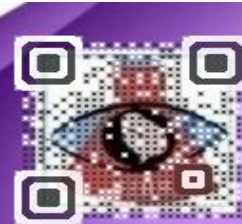
- Immune Hypothesis - Melanocytes destruction and dysfunction or both may result into Hypopigmentation of vitiligo.
- Neural Hypothesis - Neurochemical inhibitors are released at nerve endings that destroy the melanocytes or inhibit their functioning.
- Melanocyte Self-Destruction Hypothesis - Proposes that an intermediate in melanin synthesis causes melanocyte destruction.
- Dietary deficiency of Proteins and Cupro minerals is a major factor for causing vitiligo. Serum skin and cerebro-spinal fluid copper levels are low in these cases.
- A gastro-intestinal disorder like chronic amoebiasis, chronic Dyspepsia and Intestinal Worms may be additional factors.
- Use of Broad spectrum Antibiotics, especially Chloramphenicol and Streptomycin leads to appearance of vitiligo.
- Trauma or local irritation caused by wearing the sari or trousers too tightly, do produce vitiligo in individuals predisposed to it.

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- Acute stress may be followed by fast spreading type of vitiligo proving the theory of Troponeurosis. Emotional crisis may be an additional factor.
- An Endocrinal disorder may be operative, Diabetes, Pernicious anaemia, Thyrotoxicosis, Myxoedema, and Addison's disease may be associated with vitiligo.
- Composite Hypothesis - None of the theories alone is entirely satisfactory. Actual mechanism of inhibition or destruction of melanocytes is much more complex than any of these mechanisms suggested.

Precipitating Factors: -

- Emotional Crisis - Death in family, Loss of job, Sudden shock etc. Acute Stress may be followed by fast spreading type of vitiligo proving the theory of Troponeurosis. Emotional crisis may be an additional factor
- Gastro intestinal tract disorders like Worms, Jaundice, amoebiasis etc.
- Prolonged use of Drugs, antibiotics, Oral an ovulating agents etc.
- Local causes like trauma, burns exposure to chemicals etc.
- Pathologically: - A defect in enzyme Tyrosinase is held responsible for vitiligo. According to some Dermatologists, it is a Trophoneurosis and Melatonin, a substance secreted at nerve endings inhibits Tyrosinase, thus interfering in pigment formation.
- An Endocrinal disorder may be operative; Diabetes, Pernicious anaemia, Thyrotoxicosis, Myxoedema, and Addison's disease may be associated with vitiligo.
- Trauma or Local irritations caused by wearing the sari or Trousers too tightly do produce vitiligo in individuals predisposed to it.

Clinical Presentation of Vitiligo

Localised Type: - Focal - One or more macules in two single areas but not segmented.

Segmental - One or more macules in a dermatomal

pattern.

Mucosal - Involvement of mucous membrane alone.

Generalised Type:-

Acrofacial - Involvement of face and distal extremities.

Vulgaris - Scattered macules in symmetrical or asymmetrical distribution.

Universalis - Total or nearly whole body involvement.

Differential diagnosis

Conditions with similar symptoms include:

- Pityriasis alba
- Tuberculoid Leprosy
- Post inflammatory hypopigmentation
- Tinea versicolor
- Albinism.
- Idiopathic guttate hypomelanosis.
- Progressive macular hypomelanosis.
- Primary Adrenal Insufficiency.

Homoeopathic Treatment in Vitiligo

Homoeopathy never looks at Vitiligo as a local disease. Vitiligo has been considered as a local expression of a systemic disturbance. There is no single specific remedy for all the cases of Vitiligo. The exact treatment is determined only by in-depth evaluation of each individual case thus finding the exact constitution of the patient. Constitutional approach is nothing but analysis and evaluation of various factors affecting the human constitution to determine the disease diagnosis and the exact treatment in turn. Every case of Vitiligo calls for study of the patient's constitution which includes various aspects of his physical aspects as well as the in-depth study of the mental sphere, such as emotions, psychosocial background, behavior and personality pattern, etc. However Homeopathy has more than 80 remedies specific for Vitiligo which

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reduce the discoloration and helps to increase vitality & thereby stimulate melanocytes to produce Melanin.

Also it is a chronic disease and may take considerable time to cure even with the best selected homeopathic remedy. The patient should keep this in mind and should be ready to cooperate with their physician.

Leucoderma or vitiligo is treatable in homeopathy while other treatments including sun exposure, ultraviolet radiation and external applications only provide temporary relief. Also allopathic treatment is associated with side effects like liver damage, skin allergy, nausea, cataract and other eye problems. The well-selected homeopathic remedies are without any side effects.

Homeopathy treats the person as a whole. It means that homeopathic treatment focuses on the patient as a person, as well as his pathological condition. The homeopathic medicines are selected after a full individualizing examination and case-analysis, which includes the medical history of the patient, physical and mental constitution etc. A miasmatic tendency (predisposition/susceptibility) is also often taken into account for the treatment of chronic conditions. Offers a comprehensive treatment as it goes to the root of the problem by helping build up immunity and eventually restores the pigmented patches back to the normal skin color. I have observed in my clinic that there are some definite connection in the patients who are being treated for Hypothyroidism then getting Hyperthyroidism show patches of Vitiligo as drugs induced leucoderma.

Miasms-

- Syphilitic - (destruction of melanocytes) predominance.
- Psoric - Though in Aphorism 195, Dr. Hahnemann states that "In chronic local maladies that are not obviously venereal, the internal antipsoric

treatment alone requisite' suggests that it is Psoric in nature.

- Sycotic - As sycosis is the miasm which disturbs the pigment metabolism and produces hyperpigmentation and depigmentation in patches or diffuse in different parts.

MODEL CASE-1

Name: XYZ

Registration No: S - 345

Age: 19 yrs.

Gender: Male

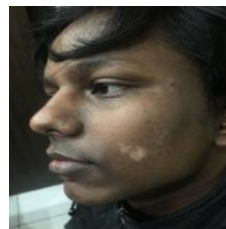
Occupation: student

Date of First Consultation: 12.03.2017

CHIEF COMPLAINT

A 19 year old boy was suffering from white discoloration of the skin on cheeks since 6 months.

Initially lesion appeared on his right cheek as an isolated pin pointed discoloration and gradually spreading on to his right cheek since six months.



ASSOCIATED COMPLAIN

- Tendency to catch cold easily < change of weather.

Past history

- Infected by Tuberculosis taken ATT for nine months
- Had chicken pox when seven years old.

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- Hemorrhoids
- Family history
- Family history of bronchial asthma.
- Physical general

• Complexion- Wheatish
 • Stature - Thin
 • Appetite - Normal
 • Thirst - Normal
 • Stool - Regular
 • Urine - Normal
 • Sweat - Normal
 • Sleep - Normal
 • Desires - Cold food and cold drinks +++
 • Food Type - Vegetarian

RUBRICS FOR REPERTORISATION

- SYMPATHETIC
- AFFECTIONATE
- SENTIMENTAL
- CLAIRVONCE
- ANXIETY – OTHERS FOR
- LOVES ANIMALS
- DESIRE COLD DRINKS
- DESIRE ICE CREAM
- REPERTORY USED:-

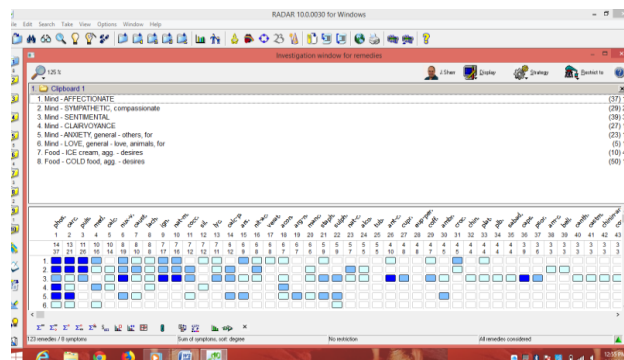
- Synthesis Repertory
- Murphy's Repertory
- Selection of Drug:
Phosphorous – 1 M

First Prescription 12.03.2017

Phosphorous 1M one dose and Placebo for one month.

Follow Up - 1 10.04.2017

Pigmentation starts appearing on cheeks.
 R/x
 Placebo for one month.



Follow Up - 2 12.05.20017

Cheek almost totally re-pigmented

R/x

Sac lac for 30 days



BEFORE TREATMENT



AFTER TREATMENT

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MODEL CASE-2

Name: XYZ

Registration No: S - 220

Age: 18 yrs.

Gender: Female

Occupation: Student

Date of First Consultation: 12.03.2017

- Stool - Regular
- Urine - Normal
- Sweat - Normal
- Sleep - Normal
- Desires - Salty food
- Food Type - Non-Veg /veg

CHIEF COMPLAINT

A girl aged 16 was suffering from white discoloration of the skin on face since 8 years. The lesion appeared on her right upper lip and gradually had spread right cheek.

The lesions are well defined with lines and the borders with brown areas of demarcation. The affected areas were white, milky in color.



Discoloration-face

REPERTORY USED

- Synthesis Repertory
- Murphy's Repertory

ASSOCIATED COMPLAINT:

Headache < sun exposure with tendency to catch cold easily.

RUBRICS FOR REPERTORISATION

Pasthistory

- Had been vaccinated for all communicable disease.
- Had chicken pox when seven years old.
- H/o Honey bee bite when five years old.
- H/o Trauma to left feet, wound treated with allopathic medicines.

- A/f death of loved one
- Grief
- Sentimental+
- Sensitive++-music-to
- Company-aversion-for++
- Anger-talk-indisposed
- Anger-consoled-when
- Dwells-on-past-disagreeable-memories

Family history

- Family history of bronchial asthma, Hypertension.
- No Familial diathesis for vitiligo.
- Mother had uterine complaints

Selection of Drug:

Natrum Mur- 1M

Physical General

- Complexion - Wheatish
- Stature - Thin
- Appetite - Normal
- Thirst - Normal

Selection of Potency:

- Following are the reasons of selecting a high potency like 1M in this particular case.
- Syphilitic miasm are predominant miasms in this case.
 - Presence of characteristic mental symptoms
 - Young age of patient .

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First Prescription 12.03.2017

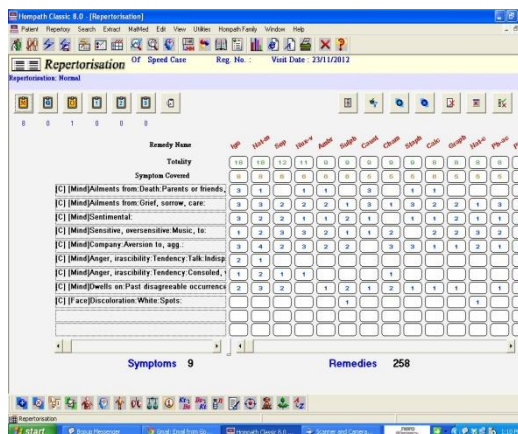
Natrum Mur 1m, one dose and Placebo for 30 days.

Follow Up - 1 10.04.2017

Pigmentation starts appearing on upper lip.
R/x Placebo for 15 days.

Follow Up - 2 08.05.2017

Upper lip almost totally re-pigmented Pigmentation on right cheek started Gradual improving mental symptoms observed in this case and patient was less introverted.
R/x Sac lac for 30 days



Follow Up - 3 08.08.2017

Pigmentation on upper lip completed cheeks much better. Sadness and nervousness diminished to much lesser degree.

R/x Sac lac for 30 days

Follow up - 4 10.10.2017

Patient is much better total repigmentation on upper lip has taken place. Patient is still under treatment as slight pigmentation on cheeks is left.

R/x Sac lac for 15 days



BEFORE TREATMENT AFTER TREATMENT

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MODEL CASE-3

Name: XYZ

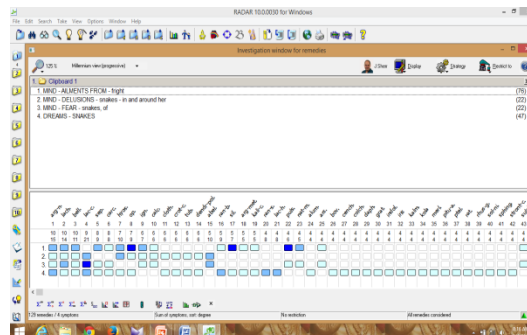
Registration No: D-251

Age: 17 yrs.

Gender: Male

Occupation: Student

Date of First Consultation: 2.10.2017



CHIEF COMPLAINT-

White patches on face since 2 year.

The lesion appeared as a small pin pointed discolored spot gradually spreading in size on lower lips and right lower eyelid.

The lesions are absolutely asymptomatic & well defined with prominent borders which are light brown in color.



RUBRICS SELECTED

- Ailment from FRIGHT.
- DELUSION SNAKES IN AND AROUND HIM/HER
- FEAR OF SNAKES
- DREAM OF SNAKES

Selection of Drug:

Calcarea Carb 1 M

TREATMENT & FOLLOW-UP:

1st prescription **2.10.2017**

Calcarea carb1M – single doses, Sac Lac one month.

2nd follow up 22-11-17 – much changes in pigmentation but patients general symptoms are improving i.e. hunger, thirst etc. Moreover mentally patient seems to be calm and composed.

FEAR & DELUSION OF SNAKES has reduced considerably thus Sac lac was given.



BEFORE

AFTER

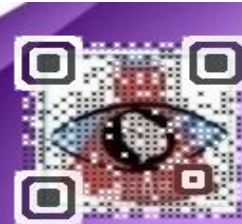
3rd follow up 2 -1-18 – Almost all spots are showing much improvement. Treatment is still continued....

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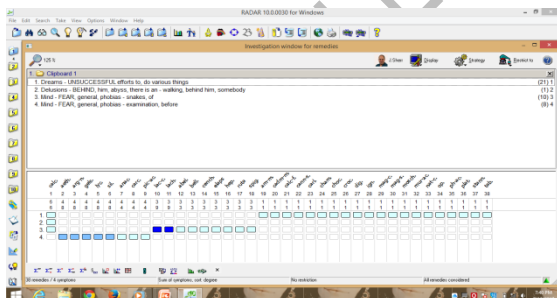
MODEL CASE - 4

Name: xyz
Registration No: U - 128
Age: 13 yrs.
Gender: Female
Occupation: Student
Date of First Consultation: 19.02.2017



RUBRICS FOR REPERTORIZATION DREAMS OF UNSUCCESSFUL EFFORTS

- **DELUSION – SOMEONE STANDING BEHIND**
- **FEAR OF SNAKES**
- **FEAR OF EXAMINATION**



Selection of Drug:

- Calcarea Carb
- Selection of Potency: 1 M single dose

TREATMENT & FOLLOW-UP:

1st prescription 19.02.2017

Calcarea carb1M – single doses for one month

2nd follow up 29-4-17

Re-pigmentation has started and patients general symptoms are improving i.e. hunger, thirst etc.

Mentally patient seems to be much calm and composed higher mental symptoms FEAR, DREAM & DELUSION OF SNAKES is much reduced Sac lac was given.

3rd follow up 19-6-17

Most of the areas are re-pigmented.

All the mental symptoms of the patients are much better.

BEFORE TREATMENT



AFTER TREATMENT



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CONCLUSION-

- The overall impact of this evidence based scientific study is encouraging. It reveals that homoeopathic drugs have definite action on melanocytic cells which starts reproducing melanin resulting in repigmentation in white spots.
- The period of treatment varies according to the area and chronicity of the disease & individual response of the patient.
- Vitiligo can be reduced and cured permanently with suitable Constitutional Homoeopathic medicines.
- Homoeopathic drugs are cost effective and easy to take having no side effects.
- The recurrence rate after homoeopathic treatment in vitiligo is nil or very less.

REFERENCES:

- *Harrison – principles of internal medicines*
- *Khanna- illustrated synopsis of Dermatology and STD*
- *Wikipedia*
- *Rox burgh –common skin diseases*
- *Soul of remedies Dr Rajan Sankaran*
- *Elements of Homoeopathy vol 1 & 2.*
- *Perceiving rubrics – Dr F.J. Master etc.*

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