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SUCCESSFUL HOMEOPATHIC MANAGEMENT OF INFANTILE ATOPIC DERMATITIS: A CASE TREATED AT DR BATRA'S HOMEOPATHY CLINIC

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Abstract

Atopic dermatitis is a chronic, relapsing inflammatory skin disorder commonly affecting infants and toddlers, often associated with familial atopy and significant discomfort. This case study documents the holistic homeopathic management of a 15-month-old toddler presenting with recurrent erythematous, non-itching eczematous eruptions predominantly involving flexural areas and extremities. Previous medical consultations failed to provide sustained relief. A classical homeopathic approach was adopted, considering totality of symptoms, susceptibility, and miasmatic background. Marked clinical improvement with complete resolution of lesions was achieved within one month, without recurrence. **This case highlights a clear transformation achieved at Dr Batra's Homeopathy Clinic.**

Keywords

Atopic dermatitis, Infantile eczema, Classical homeopathy, Totality of symptoms, Miasmatic approach, Flexural dermatitis

Introduction

Atopic dermatitis (AD) is a multifactorial chronic inflammatory dermatosis characterized by episodic exacerbations and remissions. It frequently manifests during infancy, with a strong genetic predisposition and environmental triggers. Conventional management often provides symptomatic relief but may not prevent recurrence. Homeopathy, through its individualized and holistic approach, aims to restore internal balance and promote long-term remission. This case illustrates the effective application of classical homeopathic principles in managing infantile atopic dermatitis.

Case Profile

- **Age:** 15 months
- **Gender:** Toddler
- **Ethnicity:** Indian
- **Presenting Complaint:** Recurrent red eruptions resembling boils over extremities
- **Duration:**
 - Flexural eruptions (elbows, knees): ~6 months
 - Thighs: 2–3 months
 - Lower legs and hips: ~15 days

History of Present Illness

The child presented with a history of sudden-onset red maculo-papular eruptions primarily involving elbows, knees, buttocks, thighs, and lower legs. The eruptions were **non-itching**, non-oozing, and not associated with fever. Sweating was noted predominantly in flexural areas, making the skin feel damp. The child was active, restless, and playful throughout the illness.

There was a possible association with change in food or bathing soap, as noted by parents. No active eruptions were present at the time of latest follow-up, indicating healing and remission.

Past, Family, and Antenatal History

- **Past History:** No significant medical illness
- **Family History:**
 - Father – history of eczema
 - Paternal grandmother – eczema
- **Pregnancy & Birth History:** Full-term normal vaginal delivery
- **Vaccination History:** As per national schedule

Generalities

- **Appetite:** Normal
- **Cravings:** Pancakes
- **Thirst:** Normal
- **Thermal Reaction:** Hot patient
- **Perspiration:** Normal quantity, mainly in flexures
- **Stool:** Mild loose stools (associated with teething)
- **Sleep:** Adequate

Mentals

From infancy, the child exhibited a cheerful and playful disposition. As the illness progressed, increased **restlessness** was observed, particularly during active phases of eruptions. Despite skin complaints, the child remained **happy, socially responsive, and energetic**, without irritability or lethargy. Emotional expressions were appropriate for age, with no fearfulness or withdrawal, indicating preserved vitality and good susceptibility.

Clinical Examination

- **Skin:**
 - Earlier: Red maculo-papular eruptions over elbows, knees, buttocks, thighs, and legs
 - No itching, discharge, or crusting
- **Present Status:**
 - Skin clean and healed
 - No active eruptions
- **Sweating:** Increased in flexural areas

Diagnosis

Atopic Dermatitis

Differential Diagnosis

- Hand, Foot, and Mouth Disease

Homeopathic Case Analysis

Totality of Symptoms

- Red eczematous eruptions in flexures and extremities
- No itching
- Sweats more in flexural areas
- Restless, very playful child
- Hot patient
- Strong family history of eczema

Repertorial Rubrics (PQRS)

- Skin – eruptions – eczema – flexures
- Skin – eruptions – red – extremities
- Perspiration – flexures – increased
- Mind – restlessness – children
- Generalities – heat – aggravates

Repertorization & LSMC

Based on repertorial evaluation, keynote confirmation, and clinical correspondence, the remedy closely matching the **Location, Sensation, Modalities, and Concomitants (LSMC)** was selected.

Remedy Selection & Prescription

Prescription

Medicine	Potency	Dose	Rationale
Rhus toxicodendron	30C	As prescribed	Acts on eczematous eruptions in flexures; suited to restless, active patients
Calcaria sulphurica	6X	As prescribed	Supports resolution of skin inflammation and healing

Reason for Remedy Selection

The remedy was selected based on its strong affinity for **eczema involving flexural areas**, restlessness, absence of itching, and inflammatory skin conditions in children.

Potency Selection

Potency was chosen considering **moderate susceptibility**, age of the patient, and to avoid aggravation while gently stimulating the vital force.

Miasmatic Consideration

The case predominantly reflected a **psoric-sycotic miasmatic background**, supported by family history of eczema and recurrent inflammatory skin manifestations.

Follow-Up & Outcome

Follow-Up	Clinical Status	Prescription	Remarks
Day 15	No new eruptions, redness reduced	Same continued	Improvement noted
1 Month	Complete clearance of lesions	Supportive continuation	Skin healed
Final Visit	Only teething-related loose stools	No change	Maintained remission

Transformation Table

Parameter	Before Treatment	After Treatment
Skin lesions	Red eruptions in flexures & extremities	Completely healed
Itching	Absent	Absent
Restlessness	Marked	Normal playful activity
Sweating	Excess in flexures	Normalized
Recurrence	Frequent	None observed



Discussion

This case demonstrates the efficacy of individualized classical homeopathy in managing infantile atopic dermatitis. The selection of remedy was based on totality rather than diagnosis alone. Absence of itching, localization to flexures, and restlessness were key guiding symptoms. The strong family history indicated a deep-seated predisposition, addressed through a constitutional approach. The gentle action of the selected potency ensured rapid healing without suppression. Importantly, the case underscores the role of homeopathy in providing sustained remission where conventional approaches often focus on symptomatic relief. The holistic improvement in skin health and general well-being reflects restoration of internal balance rather than mere topical resolution.

Conclusion

This case highlights a successful and sustained outcome in infantile atopic dermatitis managed through classical homeopathy. The individualized remedy selection, miasmatic consideration, and gentle potency choice resulted in complete clearance without recurrence. The transformation achieved emphasizes the strength of homeopathy as a holistic and safe therapeutic option in pediatric dermatological conditions, reaffirming the effectiveness of treatment delivered at Dr Batra's Homeopathy Clinic.

References

1. Allen HC. *Keynotes and Characteristics*. New Delhi: B Jain; 2002.
2. Boericke W. *Pocket Manual of Homeopathic Materia Medica*. New Delhi: B Jain; 2007.
3. Kent JT. *Lectures on Homeopathic Materia Medica*. New Delhi: B Jain; 2004.
4. Kent JT. *Repertory of the Homeopathic Materia Medica*. New Delhi: B Jain; 2009.
5. Banerjee SK. *Miasmatic Prescribing*. New Delhi: B Jain; 2010.
6. Hahnemann S. *Organon of Medicine*. 6th ed. New Delhi: B Jain; 2011.
7. Nelson Textbook of Pediatrics. 21st ed. Philadelphia: Elsevier; 2020.
8. Williams HC. Atopic dermatitis. *N Engl J Med*. 2005;352:2314-24.
9. Sharma B. Homeopathy in pediatric eczema. *Indian J Res Homoeopathy*. 2016;10(2):98-104.
10. Vithoulkas G. *The Science of Homeopathy*. New York: Grove Press; 2009.