



Original Research Article

Volume 15 Issue 03

March 2026

MANAGEMENT OF PLANTAR AND SCALP PSORIASIS USING INDIVIDUALIZED HOMOEOPATHY: A CASE REPORT AT DR BATRA'S

Dr Saurabh Pal

Chief Homeopathic Consultant, Whitefield Branch
 Dr Batra's Positive Health Clinic Pvt. Ltd. Qualification BHMS
 Email id chc-whitefield@drbatras.com, Mobile 9164213393

Abstract

Background: Psoriasis is a chronic immune-mediated inflammatory dermatosis characterized by erythematous scaly plaques and recurrent relapses. Management becomes more challenging in elderly patients with multiple comorbidities such as diabetes mellitus and malignancy.

Case: A 71-year-old male with diabetes mellitus and carcinoma of the buccal mucosa (status post-immunotherapy, later undergoing chemotherapy) presented with psoriasis involving the scalp, hands, feet, and legs. He had painful fissures, silvery scaling, peeling, and erythematous plaques affecting daily activities. Constitutional homoeopathic treatment with **Arsenicum album**, supported by **Mezereum** for scalp psoriasis and **Sulphur** as an intercurrent remedy, along with dietary and lifestyle advice, was prescribed.

Outcome: Within six months, marked improvement was observed in painful fissures, swelling, scaling, dryness, and scalp lesions despite ongoing cancer treatment. Skin became healthier, pain reduced substantially, and no new lesions developed.

Keywords: Psoriasis, Palmoplantar Psoriasis, Scalp Psoriasis, Diabetes Mellitus, Buccal Carcinoma, Individualized Homoeopathy.

Introduction

Psoriasis is a chronic inflammatory skin disease characterized by hyperproliferation of keratinocytes resulting in erythematous plaques with silvery scales. Palmoplantar involvement frequently causes painful fissures and impaired mobility. The coexistence of malignancy and diabetes further complicates management due to altered immunity and impaired healing.

Patient Profile

Parameter	Details
Age	71 years

Gender	Male
Occupation	Retired (Former Real Estate Business)
Duration	Approximately 1 year (scalp); hands and feet aggravated during the previous month

Chief Complaints

- Thick silvery scales over scalp
- Cracks over both palms
- Painful fissures over both soles
- Dry peeling skin over hands and feet
- Erythematous plaques over legs
- Progressive scaling

History of Present Illness

The patient presented with whitish cracks, peeling skin, and silvery scaling involving the scalp, palms, soles, and legs. Scalp scaling had been present for more than one year, while painful fissures over the palms and soles had become prominent during the preceding month.

The lesions developed gradually. Coconut oil, Vaseline, and Boroline powder had been used with minimal relief. There was no previous dermatological treatment except naturopathy.

Associated Medical History

- Diabetes Mellitus
- Carcinoma of Buccal Mucosa
- Status post Immunotherapy
- Undergoing Chemotherapy during follow-up
- Previous history of smoking, alcohol, and betel nut chewing (ceased six months before consultation)

Family History

- Father – Diabetes Mellitus
- Mother – Diabetes Mellitus and Hypertension
- Spouse – Hypertension
- Two siblings with Diabetes and Hypertension

Personal History

Parameter	Findings
Diet	Mixed
Appetite	Good
Thirst	Relatively thirstless (drinks >1 L/day)
Desire	Biryani

Sleep	Sound
Bowels	Regular
Thermal	Chilly patient
Perspiration	Generalized

Mental Generals

- Responsible since childhood after father's death
- Elder member who assumed family responsibilities early
- Previously short-tempered and grudging during youth
- Now calm and accepting
- Fear mainly regarding illness
- Goes with the flow in present life

Clinical Examination

Scalp

- Thick silvery-white scales
- Erythematous plaques

Hands

- Painful fissures
- Erythematous plaques
- Dry peeling skin

Feet

- Multiple painful cracks
- Marked dryness
- Peeling skin

Legs

- Erythematous plaques with scaling

Other Findings

- Auspitz sign absent at examination
- Nail changes absent
- Wood's lamp examination performed

Diagnosis

Palmoplantar Psoriasis with Scalp Psoriasis

Totality of Symptoms

Physical

- Silvery scalp scales
- Cracked palms and soles

- Dry peeling skin
- Chilly patient
- Generalized perspiration

Mental

- Fear of disease
- Responsible personality
- History of suppressed anger
- Grudging nature during youth
- Calm acceptance in later life

Homoeopathic Prescription

Constitutional Remedy

Arsenicum Album

Basis of Prescription

- Fear of disease
- Constitutional totality
- Chronic autoimmune skin disorder

Acute Remedy

Mezereum

Basis of Prescription

- Predominant scalp psoriasis with thick silvery scales

Intercurrent Remedy

Sulphur

Basis of Prescription

- Chronic psoriatic diathesis
- Intercurrent constitutional support

Lifestyle and Dietary Advice

- Avoid dairy products and red meat
- Maintain anti-inflammatory diet
- Do not scratch lesions
- Regular physical exercise
- Adequate hydration
- Continue prescribed skin care kit

Follow-up Timeline

Date	Clinical Progress
Initial Visit	Extensive scaling over scalp, painful fissures over palms and soles, erythematous plaques over legs.
Jan 2026	Feet significantly better; swelling and pain markedly reduced. Scalp improved though scaling persisted. Skin remained dry with no discharge.
Feb–May 2026	Progressive reduction in dryness, scaling, and erythema. General condition remained stable. Regular exercise and skin care continued.
Jun 2026	Skin healthier with persistent improvement despite chemotherapy. No discharge, reduced scaling, and stable psoriasis without major flare-up.



Figure 1: Clinical photograph showing plantar lesions

Clinical Outcome Comparison

Parameter	Before Treatment	After 6 Months
Scalp scaling	Severe	Mild
Palm fissures	Multiple painful cracks	Markedly reduced
Sole fissures	Deep painful cracks	Significant improvement
Swelling of feet	Present	Greatly reduced

Pain	Moderate to severe	Minimal
Dryness	Severe	Mild
Skin peeling	Marked	Minimal
New lesions	Progressive	None reported
Daily walking	Painful	Comfortable

Health-Related Quality of Life (HRQL)

Before Treatment

- Painful walking due to plantar fissures
- Difficulty using hands because of cracks
- Constant scalp scaling
- Skin discomfort affecting routine activities
- Additional emotional burden of cancer treatment

After Treatment

- Walking became significantly more comfortable
- Pain and swelling markedly reduced
- Scalp lesions improved considerably
- Better skin hydration
- Daily activities became easier despite ongoing chemotherapy
- Improved overall comfort and quality of life

Learning Points

- Palmoplantar psoriasis can improve significantly even in elderly patients with multiple systemic comorbidities.
- Individualized constitutional prescribing helped stabilize chronic psoriasis during concurrent cancer treatment.
- Scalp-specific prescribing with *Mezereum* complemented constitutional management.
- Lifestyle modification, skin care, and patient adherence contributed substantially to sustained improvement.

Conclusion

This case demonstrates successful management of **palmoplantar and scalp psoriasis** in a 71-year-old patient with **diabetes mellitus** and **carcinoma of the buccal mucosa** receiving oncological treatment. Individualized homoeopathic management using **Arsenicum album**, **Mezereum**, and **Sulphur**, together with dietary advice, exercise, hydration, and skin care, resulted in marked reduction in fissures, scaling, dryness, erythema, and pain over six months. The patient maintained clinical improvement despite chemotherapy, highlighting the value of individualized supportive management in complex chronic dermatological conditions.