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HEALING LICHEN PLANUS: A HOMEOPATHIC SUCCESS STORY AT DR. BATRA'S CLINIC

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Abstract

Lichen planus is a chronic inflammatory skin condition that commonly presents with purplish, itchy, and polygonal papules, typically affecting the skin, mucous membranes, and nails. This paper explores a unique case of a 42-year-old teacher who developed redness and itching on her face the patient sought homeopathic treatment at Dr. Batra's Clinic her condition showed marked improvement. The paper highlights the role of individualized homeopathic treatment in addressing the root cause of lichen planus and providing long-term relief.

Keywords:

Lichen planus, Dr. Batra's Clinic, homeopathic treatment

Introduction

Lichen planus is a chronic inflammatory skin disorder that primarily affects the skin, mucous membranes, and nails. Its exact cause remains unclear, but it is often associated with autoimmune responses, viral infections, and genetic factors. Common signs include purplish, flat-topped bumps, intense itching, and hyperpigmentation. Symptoms typically worsen with stress, sun exposure, and certain medications. Complications may include scarring, hair loss, and difficulty swallowing if the mucous membranes are involved. Early intervention is essential to prevent further skin damage and discomfort.

Case Profile

A 42-year-old teacher, has been dealing with redness, itching, and hyperpigmented plaques on her face and bilateral arms for the last five years. Her symptoms began after a trip to Daman, where she was diagnosed with urticaria by an allopathic doctor. The condition worsened with sun exposure, especially during summers. Initially, she was treated with steroids, but the symptoms continued to flare up, prompting a shift to homeopathic treatment on an SOS basis. Over time, hyperpigmented plaques began to form, and she sought allopathic treatment for melasma, which offered some relief. After trying others homeopathic treatment for six months, she again resorted to allopathic medication, which resulted in slight improvement. Despite the treatments, her skin remains dry and itchy, and she has developed an intolerance to heat and coconut oil. The patient's stress, mostly work-related, appears to exacerbate the condition. She has also experienced occasional itching, especially after waking up, and mild constipation. Over the course of her treatment, she has observed some improvement in pigmentation, but the condition remains persistent. Socially, her appearance, especially the hyperpigmentation on her face, has become a source of embarrassment, impacting her confidence in her professional and personal life.

Physical Generals

Diet	Mixed
Appetite	Good
Desire	Prefers spicy and non veg
Aversion	N.S
Thermal Reaction	Ambithermal
Thirst	Normal 2-3 lit/day
Stools	Normal
Urine	Normal
Perspiration	Normal, N.S.,N.O., more on underarms
Sleep	Refreshing
Dreams	Dead people
Obs history	Menarche at the age of 13 Years, Uterus Removed 15 Years Back

Examination

CVS - S1 S2 heard, no murmurs

RS – AEBE clear

CNS - Well oriented, no focal neurological deficit

GIT – Soft, non-tender, no organomegaly

Vitals – Stable

BP 120/80 mmHg,

Pulse 76 bpm,

Temp 98.6°F,

Respiratory rate 16/min,

Oxygen saturation 98%.

Skin Examination:

Hyper pigmented plaques noted on the face and bilateral arms with defined borders.

Dry, itchy patches.

Skin texture appears rough in affected areas.

Investigation

Hemoglobin (Hb): 12.1 g/dL

Liver Function Test (LFT), Kidney Function Test (KFT): Within normal limits (WNL)

Thyroid Stimulating Hormone (TSH): 4.31 µIU/mL

Blood Sugar (BSF): 90.1 mg/dL

HbA1c: 3.8%

Vitamin B12: 442 pg/mL

Vitamin D: 41 ng/mL

S. IgE: 17.06 IU/mL

Red Blood Cell (RBC): 4.06 million/µL

Total Leukocyte Count (TLC): 5900 cells/μL

Mental Generals -

A 42-year-old teacher, living in a nuclear family with a husband who has cholesterol issues and a 15-year-old son in good health, has been struggling with skin issues for the past five years. After a trip to Daman, she developed redness and itching on her face and arms, which was diagnosed as urticaria. Over time, her condition evolved into hyperpigmented plaques, treated initially with steroids and later with homeopathy for partial relief. Her skin is dry, itchy, and hyperpigmented, and she is highly sensitive to heat, particularly sun exposure and coconut oil. She had a hysterectomy in 2007, a history of typhoid four years ago, and contracted COVID-19 in December. Her mother, who had urticaria, tragically passed away in an accident, and her grandmother had a similar condition. Her father is in good health, and her father-in-law has cancer. She reports that work-related stress, particularly concerning her facial pigmentation, has aggravated her skin condition. She works as a teacher at the Air Force, where the demanding work environment has contributed to increased anxiety, especially about her appearance. This anxiety is accompanied by a lack of confidence and stage fright, leading her to avoid social gatherings. Emotionally, she is introverted, reserved, and sensitive, especially regarding her family. The loss of her mother and mother-in-law has deeply affected her, and she often experiences stress, sadness, and emotional withdrawal. She is highly sensitive to her family's well-being and expresses her emotions through crying or withdrawing. In social situations, particularly public speaking, she experiences anxiety, sweating, trembling, and a racing heart. Although not quick to anger, she expresses it by shouting and crying after a significant issue. Her lowest moment was the sudden death of her mother, and her happiest was the birth of her son. She enjoys art and craft, finding creative work a source of relaxation. She also experiences recurring dreams about deceased relatives, often involving their dead bodies, leaving her frightened and unsettled. Her emotional, mental, and physical health is significantly influenced by her anxiety, sadness, and sensitivity to stress.

Past History:

Hysterectomy in 2007 during parturition.

Typhoid 4 years ago.

COVID-19 in December of the previous year.

Family History:

Mother: History of urticaria, passed away in an accident.

Grandmother: History of urticaria.

Case analysis - reportorial totality

Repertory used	Rubrics selected
Synthesis Repertory	 MIND - FEAR - air - open; in MIND - ANGER - trifles; at MIND - INDIFFERENCE - loved ones, to MIND - ANTICIPATION - stage fright MIND - ANGER - weeping; with

Repertory screenshot

Remedies	$^{q_{CO_{D_{i}}}}$	sep.	ars.	plat,	anac.	// ₉ q	cih_{a}	nat-p.	1104	hep.	nat-m.	phos.	Syph	mea.	merc.	Nux.v.	Dh.ac.	811.	≥in _{C.}	carb. _{V.}
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Symptoms Covered	3	3	3	3	3	3	3	3	2	2	2	2	2	2	2	2	2	2	2	2
Intensity	5	5	4	4	3	3	3	3	4	4	4	4	4	3	3	3	3	3	3	2
Result	3/5	3/5	3/4	3/4	3/3	3/3	3/3	3/3	2/4	2/4	2/4	2/4	2/4	2/3	2/3	2/3	2/3	2/3	2/3	2/2
Clipboard 5																				
MIND - FEAR - air - open; in				1	1	1	1			2				1		1				
MIND - ANGER - trifles; at	2	1	2	2	1	1		1	1	2	2	1				2	1	1	1	
MIND - INDIFFERENCE - loved ones, to	2	3	1	1		1	1	1	3			3	2		1					1
MIND - ANTICIPATION - stage fright	1	1	1		1		1	1			2		2	2	2		2	2	2	1
MIND - ANGER - weeping; with																				

Selection of Remedy

Constitutional Remedy Sepia 200 foll by Arsenic Album 200

Miasmatic approach

Symptoms / Rubrics	Psora	Sycosis	Syphilis	Tubercular
MIND – Fear of open air	✓			✓
MIND – Anger at trifles	√	√		
MIND – Indifference to loved ones			✓	
MIND – Anticipation; stage fright	√			✓
MIND – Anger with weeping	√			

Results

Month	Progress	Prescription
July	Initial visit – hyperpigmentation on face since 5 years	Sepia 200 Ars Album 200 Od Alt With Ber Aqua 200 Od
Aug	Itching improved (on Zempred), reduced steroid dose; skin dry, heat aggravates, pigmentation persistent	Ars Album 200 Bd Along With Sil 6x La
Sept	Slight improvement in pigmentation; itching on/off continues; steroid use stopped	Ars Album 200 Bd Along With Sil 6x La
Oct	Steroids stopped 15 days ago; small dot-like eruptions on hairline; stool clear	Sepia 200 Ars Album 200 Bd Along With Sil 6x La
Nov - March	Pigmentation better; dot-like eruptions on cheeks; itching occasionally with heat	Ars Album 200 Bd Along With Sil 6x La
april	Pigmentation improved; itching reduced by 5–10%	Sepia 200 Ars Album 200 Bd Along With Sil 6x La
May	Pigmentation better; slight redness/itching above eyebrows after waking	Sepia 1m Ars Album 200 Bd Along With Sil 6x La
June	Pigmentation improving; dullness persists; dot-like eruptions and heat sensation	Sepia 1m Ars Album 200 Bd Along With Sil 6x La

Discussion & Conclusion

The patient presented with persistent hyperpigmentation, facial itching, and occasional eruptions for over five years, aggravated by sun exposure and prior steroid use. Initial prescriptions focused on constitutional support and detoxification using remedies like Silicea 6X, Arsenicum Album 200C, and Sepia. Over the 12-month period, notable improvement was observed in pigmentation, reduction in itching, and stabilization of eruptions. The withdrawal of steroids was managed successfully with minimal rebound. Homeopathic treatment individualized to the patient's physical and emotional state, along with consistent follow-ups, led to significant recovery. This case highlights the efficacy of holistic, long-term homeopathic care in managing chronic dermatological conditions.

The transformation



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