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## TO STUDY CASE SERIES OF ALOPECIA AREATA IN MEN AND WOMEN AGED 18 TO 35 YEARS WITH INDIVIDUALIZED HOMEOPATHIC MEDICINES

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### ABSTRACT

Alopecia and the Role of Homeopathy in its Treatment With the arrival of the 21st century, global health consciousness has reached new heights. One such rising health concern is hair loss, or alopecia, a condition that has become increasingly common and distressing in both men and women of all ages. Alopecia refers to hair loss from areas where hair typically grows, such as the scalp or other parts of the body. Homoeopathic remedies work not by masking the symptoms but by strengthening the internal system, improving immunity, and addressing the emotional and psychological aspects of the condition. The peak incidence is in the second and third decades of life. Heterogeneity in Presentation to better understand the clinical variations of alopecia areata, Ikeda conducted an extensive 18-year survey and proposed a classification based on the associated conditions and disease course. The exact cause of alopecia areata is multifactorial and includes. The effectiveness of the homoeopathic individualized medicine in the management of Alopecia areata is studied. As awareness of holistic wellness continues to grow in the 21st century, homoeopathy stands out as a beacon of safe, enduring, and compassionate healthcare.

### KEYWORDS

Alopecia areata, Homoeopathy, Individualization

## **OBJECTIVES / AIMS:**

To study the use of homeopathic medicines for treating alopecia areata in men and women aged 18 to 35 years.

## **INTRODUCTION**

### **Alopecia and the Role of Homeopathy in its Treatment**

With the arrival of the 21st century, global health consciousness has reached new heights. Paradoxically, despite advancements in nutrition, personal care, and preventive medicine, ill health appears to be more frequent. One such rising health concern is hair loss, or alopecia, a condition that has become increasingly common and distressing in both men and women of all ages.

Over the past two decades, homeopathy has re-emerged as an effective and popular alternative system of medicine. Founded by Dr. Samuel Hahnemann, homeopathy is a holistic approach grounded in the natural laws of healing, based on meticulous observation, experimentation, and clinical experience. According to Aphorism 53 of Hahnemann's Organon of Medicine, genuine and lasting cures can only be achieved through the homeopathic method. This is because homeopathy is aligned with nature's eternal and infallible healing principles, offering mild yet effective treatments that strengthen the body's natural defenses.

### **Understanding Alopecia**

Alopecia refers to hair loss from areas where hair typically grows, such as the scalp or other parts of the body. It is more than just a cosmetic issue; it carries deep psychological, social, and emotional consequences. While hair is important to everyone, it holds particular socio-cultural significance for women. As Martin Luther once said, "The hair is the richest ornament of women." Hence, hair loss can lead to feelings of insecurity, loss of self-esteem, and even depression, especially in younger individuals. Modern medicine offers limited and often unsatisfactory solutions to alopecia, mostly relying on topical applications or medications with potential side effects. This has led many patients to explore homeopathy as a safer and holistic option.

## **Homeopathic Perspective on Hair Loss**

In homeopathy, hair loss is not treated as an isolated symptom but rather as an external manifestation of a deeper internal disorder. There is no one-size-fits-all remedy for alopecia in this system. Instead, homeopathy uses a "constitutional treatment" approach, which involves a comprehensive analysis of the individual's overall lifestyle, psychological makeup, physical characteristics, dietary habits, and family history. This personalized method seeks to identify the root cause of hair loss and provide remedies that stimulate the body's healing mechanisms. The treatment is not directed merely at stopping hair fall but also at rejuvenating the scalp and hair follicles, thereby promoting healthy regrowth over time.

## **Homeopathy's Role in Alopecia Management**

Hair loss is often chronic and needs long-term constitutional treatment. Homeopathy is particularly well-suited to chronic conditions because it addresses underlying imbalances and aims to restore the body's internal harmony.

While complete reversal of baldness may not always be possible, especially in cases where follicles are completely inactive, many patients experience noticeable hair regrowth within a few months of starting treatment. Importantly, homeopathy avoids the use of invasive procedures or chemical-based treatments, making it a preferable choice for people seeking natural remedies.

Homoeopathic remedies work not by masking the symptoms but by strengthening the internal system, improving immunity, and addressing the emotional and psychological aspects of the condition.

## **Scientific Support and Patient Outcomes**

Clinical observations and patient-reported outcomes indicate that homeopathy has shown promising results in treating alopecia areata and other types of hair loss. Research suggests that homeopathic remedies help optimize immune system function, which is especially important since alopecia areata is considered an autoimmune condition. Since the remedies are safe, non-toxic, and suitable for people of all ages, homeopathy offers a painless and side-effect-free treatment option, ideal for chronic and psychologically distressing issues like hair loss.

## LITERATURE REVIEW

### Alopecia Areata: A Deeper Insight

**Alopecia Areata (AA)** is an autoimmune disorder characterized by localized, patchy hair loss without any visible scarring or inflammation. Though the hair loss often occurs on the scalp, it can affect any hairy area of the body. First described by the Roman physician Celsus in 14–37 AD, its cause, severity, and progression remain unpredictable.

### Epidemiology

Alopecia areata affects approximately 1–2% of the general population worldwide. It has no sex predilection and can occur at any age, though most cases appear before the age of 40. The peak incidence is in the second and third decades of life. A family history is present in about 10–20% of cases, supporting a genetic predisposition.

### Heterogeneity in Presentation

To better understand the clinical variations of alopecia areata, Ikeda conducted an extensive 18-year survey and proposed a classification based on the associated conditions and disease course:

#### 1. Atopic Type (10%)

- Begins in childhood or adolescence.
- Progresses slowly with patches lasting over a year.
- Ophiasis and reticular patterns are common.
- 30–75% progress to total alopecia.

#### 2. Autoimmune Type (5%)

- Affects middle-aged individuals.
- Has a prolonged course with high chances (10–50%) of leading to alopecia totalis.
- Frequently associated with autoimmune disorders like diabetes mellitus and peptic ulcers.

#### 3. Prehypertensive Type (4%)

- Occurs in young adults with hypertensive parents.
- Progresses rapidly with 40% developing total alopecia.
- Reticular patterns are common.

#### 4. **Common Type (81%)**

- Seen in adults aged 20–40.
- No associated disorders.
- Patches last less than 6 months with spontaneous regrowth often seen within 3 years.

### Etiology of Alopecia Areata

The exact cause of alopecia areata is multifactorial and includes:

#### 1. **Genetics**

- Strong hereditary connection, especially with HLA haplotypes like DQ3, DR4, DR11.

#### 2. **Psychological Factors**

- Stress and anxiety may trigger or worsen the condition.

#### 3. **Autoimmunity**

- AA is widely considered an autoimmune disorder.
- **Clinical Associations:** Includes diseases like Hashimoto's thyroiditis, Addison's disease, and ulcerative colitis.
- **Humoral Immunity:** Circulating antibodies against organs such as the thyroid, stomach, and adrenal glands.
- **Histopathological Evidence:** Lymphocytes infiltrating around hair follicles.
- **Cell-Mediated Immunity:** Hair bulb keratinocytes abnormally express HLA-DR antigens, pointing to immunological injury.
- **Genetic Syndromes:** Often associated with Down syndrome.

### Clinical Features

- **Incidence:** Estimated at 17.2 per 100,000 people annually.
- **Sex Distribution:** Some studies indicate male predominance (2:1), while others show no gender difference.
- **Age Group:** Most cases occur between ages 5 to 35. Less than 2% are seen in infants or elderly above 60.
- **Family History:** Positive in 10–20% of cases.
- **Patch Characteristics:** Smooth, round or oval, well-defined, and completely bald. Affected areas are slightly sunken due to the absence of hair bulbs.
- **Exclamation Mark Hairs:** Short, broken hairs with a thinner base found at the margins of patches, a classic sign of AA.
- **Coudability Sign:** When bent, the hair shaft kinks 5–10 mm above the skin surface in affected areas.

### Patterns and Progression

While AA typically begins with one or more distinct bald patches, several other patterns exist:

- **Diffuse Pattern:** Widespread thinning without distinct patches.
- **Ophiasis Pattern:** Starts at the occipital scalp and extends along the sides, more common in children and those with atopy.
- **Reticulate Pattern:** A net-like arrangement of bald patches.

Though many cases resolve spontaneously, 1–5% progress to **alopecia totalis** (complete scalp hair loss) or even **alopecia universalis** (loss of all body hair). The overall chance of not recovering from an initial AA episode is low—about 1 in 150. Prognosis is worse in children, particularly those with associated atopic conditions.

### Histopathology

The classic histological finding in active lesions is a “swarm of bees” appearance due to a peribulbar lymphocytic infiltrate surrounding the lower anagen hair follicles. Other changes include increased telogen hair count, miniaturization, and dystrophic hair follicles. In longstanding or inactive cases, the inflammatory infiltrate may be absent, and follicles may appear miniaturized or replaced by fibrous tracts.

## Investigations

A thorough diagnostic workup helps identify any underlying systemic cause or associated disorder:

- Complete Blood Count (CBC)
- Liver and Renal Function Tests
- Iron Studies and Serum Ferritin
- Thyroid Function Tests
- Immunological Tests and Antibody Screening
- Syphilis Serology

## Diagnosis

Diagnosis is largely clinical. In uncertain cases, **dermoscopy** can assist by showing yellow dots, black dots, broken hairs, and exclamation mark hairs. A scalp biopsy is rarely needed but can confirm diagnosis and rule out other forms of hair loss like tinea capitis or scarring alopecias.

Laboratory workup is not routinely required unless autoimmune comorbidities are suspected. Thyroid function tests, antinuclear antibodies (ANA), and vitamin D levels may be checked if clinically indicated.

These investigations assist in tailoring an appropriate treatment plan and monitoring disease progression.

## Differential Diagnosis

- Tinea capitis
- Trichotillomania
- Telogen effluvium
- Androgenetic alopecia
- Secondary syphilis
- Scarring alopecias (e.g., lichen planopilaris)

## Allopathic Management

In many cases, especially those where the patches do not expand or worsen, **no treatment is necessary**, and spontaneous hair regrowth is possible. However, active or progressive cases may require medical intervention. Common treatment options include:

- **Topical or Intralesional Corticosteroids:** Most widely used treatment for localized AA.
- **Systemic Steroids:** Reserved for extensive or rapidly progressing cases.
- **Immunotherapy and Immunosuppressants:** Such as DPCP, anthralin, and cyclosporine in severe or refractory cases.
- **Other Agents:** Minoxidil and topical irritants may be prescribed to stimulate regrowth.

### **Prognosis**

The course of alopecia areata is highly variable. Spontaneous regrowth occurs in about 30–50% of patients within a year, especially in limited disease. Poor prognostic factors include:

- Early age of onset
- Severe forms (totalis/universalis)
- Nail involvement
- Ophiasis pattern
- Association with other autoimmune diseases

Relapse is common, even after successful treatment.

### **Associated Conditions**

Alopecia areata is often associated with other autoimmune diseases, such as:

- Autoimmune thyroid disease (Hashimoto's thyroiditis)
- Vitiligo
- Type 1 diabetes mellitus
- Atopic dermatitis



- Pernicious anemia

A detailed personal and family history can help uncover associated conditions.

#### **RESEARCH METHOD / METHODOLOGY:**

**SOURCES OF DATA/PROJECT SITE:** The study was carried out at Kalidas Hospital, Vyara

#### **THE MATERIAL UTILIZED FOR THE STUDY:**

- The material utilized for the study is a specially designed case format for the study.
- Manual Mercury Sphygmomanometer.
- Stethoscope
- Magnifying glass
- Torch

#### **METHOD OF DATA COLLECTION:**

The study will be performed in the following ways:

**Type of study:** Experimental Study

**Method of samples:** Non-random Sampling

**Size of Sample:** 10 cases

**Duration of treatment:** 30-60 days

#### **INCLUSION CRITERIA**

1. All the patients fulfill the case definition
2. Patients who are willing to join the research and cooperate with regular follow-ups.
3. Patients of 18-35 age groups and both sexes studied.
4. Pre-diagnosed patients with following symptoms given in diagnostic criteria.

#### **EXCLUSION CRITERIA**

1. Patience with other chronic diseases, severe complications, taking steroids internally or as an external application etc.
2. Cases not fulfilling the case definition
3. Female patients with pregnancy and lactation
4. Cases with irregular follow-ups

#### **DIAGNOSTIC CRITERIA (CLINICAL):**

- **Sudden onset of patchy hair loss** on the scalp or other hair-bearing areas.
- **Well-defined round or oval bald patches** with smooth, normal-looking skin.
- **Exclamation mark hairs** (short, broken hairs that are narrower at the base).
- **Preserved follicular openings** (no scarring).
- **No scaling, redness, or inflammation** (helps rule out fungal or inflammatory causes).

#### **IMPROVEMENT CRITERIA:**

**Score used:** MONARCH (Modified NARanjo Criteria for Assessment in Homeopathy)

Due to the lack of a global score for assessing improvement in Alopecia after treatment, the 'MONARCH- Modified NARanjo Criteria for Assessment in Homeopathy' is used.

The following parameters were fixed according to the type of response obtained after the treatment.

**Selection of remedy:** Following a thorough homeopathic case taking and physical examination, an individualizing totality was formed, and the remedy was chosen using homeopathic principles based on symptom similarity. These medicines were prescribed on the basis of symptom similarity, according to homeopathic Materia Medica.

**Drug potency:** 30, 200 & 1M potency, in a few doses

**Drug administration:** This was done through an oral route, in a few doses, 4 globules, 40 number sizes.

**Criteria for follow-up:** All patients were duly followed up regularly after 7 days of treatment, and symptomatic and clinical changes were recorded.

#### **CRITERIA FOR ASSESSMENT:**

##### **Improved:**

Sensation of well-being physically and mentally with disappearance of all the symptoms for which patient approached, without recurrence within period of study and Modified Monarch-9 score of above or at '8 Marks'

##### **Not Improved:**

No relief of complaints even after sufficient period of treatment and Modified Monarch-9 score below '8 Marks'

##### **Result / findings:**

The study was conducted on 10 patients of 18-35 years of age and both sexes. In this study, all 10 patients were prescribed medicines on the basis of principles of homoeopathy.

**TABLE: 01 DISTRIBUTION OF CASES ACCORDING TO GENDER**

	<b>CASES</b>	<b>PERCENTAGE</b>
<b>Female</b>	06	60
<b>Male</b>	04	40
<b>Total</b>	10	100

**TABLE: 02 DISTRIBUTION OF CASES ACCORDING TO RESULT OBTAINED**

<b>RESULT</b>	<b>CASES</b>	<b>PERCENTAGE</b>
<b>Improved</b>	07	70
<b>Not improved</b>	03	30
<b>Total</b>	10	100

## **DISCUSSION**

To study case series of alopecia areata in men and women aged 18 to 35 years with individualized homeopathic medicines was concluded after observing & treating 10 patients. Objectives are to study the clinical presentation of Alopecia areata. The effectiveness of the homoeopathic individualized medicine in the management of Alopecia areata is studied. Cases were selected on the basis of inclusion & exclusion criteria. Out of 10 patients, the majority are females, which are more affected as compared to males, i.e., 4 cases of males versus 6 cases of females. Out of 10 cases, 7 were improved, i.e., 70%, while 3 were not improved, i.e., 30%.

## **CONCLUSION**

This study illustrates the efficacy of individualized homoeopathic medicines in Alopecia areata. Randomized controlled trials with double-blind design are suggested further. In summary, homeopathy offers a promising, gentle, and natural approach to treating alopecia. By focusing on the root causes and considering the person as a whole—body, mind, and spirit—homeopathy aims not just to stop hair loss but to restore overall health and vitality. The constitutional approach ensures personalized care, making it a reliable and effective system in addressing both the visible symptoms and invisible distress caused by alopecia. As awareness of holistic wellness continues to grow in the 21st century, homeopathy stands out as a beacon of safe, enduring, and compassionate healthcare.

## **LIMITATIONS**

Globally, there was no specific scale found for the assessment of the treatment outcome in the case of alopecia areata. So, the results of this study cannot be generalized to any population. Randomized controlled trials with double-blind design are suggested further.

## **RECOMMENDATIONS**

The role of homeopathy in alopecia areata could not be concentrated in such a short timeframe. Eventually, a longer study period may reveal a better understanding of these aspects. A comparative study in the future can be carried out to assess whether treatment results vary with individualized medicines or with a specific group of medicines for alopecia areata. It is desirable to conduct randomized controlled

studies with large number of sample size and comparative studies on individualized homoeopathic medicine.

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## Case 1

A male patient of 19 years age residing at Vyara, Gujarat presented with complaints of hair falling in patch over vertex since 6 months with mild itching occasionally. He was also having mild headache of pulsating nature. The size of bald patch increased in size. Itching also increased with exfoliation of small scales. Along with that he startles at night frequently since last 15-20 days. History of Chicken pox at the age of 2 years – no complications. No history of similar trouble in past. No skin diseases in past. No family members have similar complaints.

### Physical General:

**Appetite:** Usually normal, Eats frequently small quantity. He does not take food timely. Appetite significantly decreased after taking allopathic drugs.

**Desire:** Sweet+++

**Stool:** Usually normal Constipation when change of place and water stool hard difficult to evacuate

**Mental General:** - He is usually introverted and reserved, cool, calm minded, not so obstinate. Constipation when change of place, water and food is an associated complaints patient has. Low self-esteem. Perfectionist.

### Physical Examination:-

**General Appearance:** Thin, malnourished

### Regional Examination:

Location of affection: Scalp (Vertex)

Number of patches: One

Size: 2 cm

Dandruff: moderate

Scales: small, rough

Hair: Dry comes out in spot-bunch

### Totality of symptoms:

Want of self confidence

Introverted

Perfectionist

Reserved

Shy

Desire for sweet

Startle and screaming at night

Chilly

Hair falling in patch from vertex

Excessive itching and scaling

Dandruff

Pulsating type of headache

MIND	
1 MIND - CONFIDENCE - want of self-confidence	X
2 MIND - FRIGHTENED easily	X
3 MIND - INTROVERTED people	X
4 MIND - PERFECTIONIST	X
5 MIND - RESERVED	X
6 MIND - SHRIEKING	X
7 MIND - SHY	X
HEAD	
8 HEAD - DANDRUFF •	X
9 HEAD - HAIR - falling - Vertex; from	X
10 HEAD - ITCHING of scalp	X
11 HEAD - PAIN - pulsating pain	X
RECTUM	
12 RECTUM - CONSTIPATION	X
13 RECTUM - CONSTIPATION - travelling, while	X

GENERALS			
14 GENERALS - FOOD and DRINKS - s			
Remedies	ΣSym	ΣDeg	Symptoms
lyc.	11	27	1, 2, 5, 6, 8, 9, 10, 11, 12, 13, 14
sep.	11	21	1, 2, 5, 6, 8, 9, 10, 11, 12, 13, 14
nat-m.	10	22	1, 2, 5, 6, 8, 10, 11, 12, 13, 14
calc.	10	20	1, 2, 5, 6, 8, 9, 10, 11, 12, 14
sil.	10	17	1, 2, 5, 6, 8, 9, 10, 11, 12, 14
hep.	10	14	1, 2, 5, 6, 8, 9, 10, 11, 12, 14
tritic-vg.	10	11	1, 2, 5, 6, 8, 10, 11, 12, 13, 14
sulph.	9	21	1, 2, 5, 6, 8, 10, 11, 12, 14
graph.	9	20	1, 2, 5, 6, 8, 9, 10, 12, 14
phos.	9	20	1, 2, 5, 6, 8, 10, 11, 12, 14

### Selection of Medicine with reason:

For people with low self-esteem, insecurity, and a tendency to experience mental exhaustion and physical degeneration. It helps in cases where emotionally charged stress is the underlying cause of alopecia.

**3Prescription:**

Rx

LYCOPodium CLAVATUM 1M X 1 dose X Oral

SAC LAC X 4pills x TDS x 7 days X Oral

**Follow up:**

No. of Follow-up	Change in Complaints	Prescription
1	No change	Rx SAC LAC X 4pills x TDS x 7 days X Oral
2	As it is.	Rx SAC LAC X 4pills x TDS x 7 days X Oral
3	Falling of hairs stopped, Dandruff as it is, Itching present	Rx SAC LAC X 4pills x TDS x 7 days X Oral
4	Status quo No further hair growth	Rx LYCOPodium CLAVATUM 10M X 1 dose X Oral SAC LAC X 4pills x TDS x 7 days X Oral
5	Small hairs started appearing, Mild itching, No dandruff	Rx SAC LAC X 4pills x TDS x 7 days X Oral
6	Small, thin black hairs on bald patch, Itching occasionally	Rx Sac Lac X 4pills x TDS x 7 days X Oral
7	Hair growth found, bald patch covered with hairs, No other complaints	Rx Sac Lac X 4pills x TDS x 7 days X Oral
8	Quite better	Rx Sac Lac X 4pills x TDS x 7 days X Oral

**Case 2**

A male patient of 20 years age residing at Vyara, Gujarat presented with complaints of one-month history of progressive hair loss, initially diffuse across the scalp and later more pronounced in the temporal regions. The left temporal area developed a bald patch, which gradually increased in size, followed by a smaller patch on the right temporal region. Associated



symptoms included pruritus and mild dandruff. The patient did not seek medical attention initially; however, upon the enlargement of the patches to approximately 1.5 inches, he sought treatment for cosmetic concerns.

**Physical Generals:-**

**Appetite:** Wants food at night though he had good food all the day

**Thirst:** Increased thirst wants water every half an hour

**Desire:** cold water

**Aversion:** Sweet

**Stool:** once/day

**Urine:** Nocturnal enuresis occasionally

**Thermal:** Desire for cold water, wants fan, avoids covering- Chilly

**Mental Generals:-**

Since early childhood he is a good child. He used to play with very person to whom whether he knows or not. He was obstinate. He disliked being alone. When he grown is became more jovial and playful with friends. Emotional sensitivity—easily hurt or offended. A strong need for affection and attention. A strong desire for sympathy and understanding from others. Optimistic. The nature worsens since one month.

**Physical Examination:-**

**General Appearance:** Average built. Well nourished

**Regional Examination:**

Location of affection Scalp: temporal both side

Number of patches: two

Left temporal: 1.5 inches Right temporal: 1 inch

Hair: Dry Dandruff: Mild

**Totality of symptoms:**

Affectionate

Company desire

Obstinate

Sympathetic

Appetite increased

Thirsty

Cold water desire

Sweet aversion

Chilly

Hair fall in bunches of temple region with itching and oozing of blood

### Reportorial Totality:

MIND			
1 MIND - AFFECTIONATE			×
2 MIND - COMPANY - desire for			×
3 MIND - OBSTINATE			×
4 MIND - SYMPATHETIC			×
HEAD			
5 HEAD - HAIR - falling			×
6 HEAD - ITCHING of scalp			×
STOMACH			
7 STOMACH - APPETITE - increased			×
8 STOMACH - THIRST			×
GENERALS			
9 GENERALS - FOOD and DRINKS - cold water desire			×

  

10 GENERALS - FOOD and DRINKS - sweet aversion			
Remedies	ΣSym	ΣDeg	Symptoms
phos.	10	26	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
calc.	10	22	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
lyc.	10	21	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
sulph.	10	21	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
nat-m.	10	20	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
caust.	10	19	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
kali-s.	10	18	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
bell.	10	17	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
puls.	10	16	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
calc-p.	10	13	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
nat-sil.	10	11	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
ars.	9	20	1, 2, 3, 5, 6, 7, 8,

### Selection of Medicine with reason:

Based on the symptoms, **Phosphorus** could be considered a match for this profile. The combination of **emotional sensitivity**, **hair loss in patches** (with itching and blood oozing),

**desire for cold water**, and a **chilly feeling** all align with characteristics that are commonly treated with **Phosphorus**.

### Prescription:

Rx

PHOSPHOROUS 1M X 1 dose X Oral

SAC LAC X 4pills X TDS X 7 days X Oral

### Follow up:

No of follow-up	Change in Symptomatology	Further Advice (regarding prescription, general management, investigation etc.)
1	Falling of hairs stopped, Patches as it is. Itching present	Rx SAC LAC X 4pills X TDS X 7 days X Oral
2	Falling of hairs stopped, Patches as it is. Small furry hair appeared in bald Itching present	Rx SAC LAC X 4pills X TDS X 7 days X Oral
3	Small hairs grown up Itching present	Rx SAC LAC X 4pills X TDS X 7 days X Oral
4	Small hair grown up No further hair growth. Thuja is the leading anti-sycotic remedy. It helps remove the miasmatic block and allows the body to heal the hair loss from within.	Rx THUJA 1M X 1dose X HS X Oral SAC LAC X 4pills X TDS X 7 days X Oral
5	Quite better	Rx SAC LAC X 4pills X TDS X 7 days X Oral

### Case 3

A female patient of 26 years age residing at Vyara, Gujarat presented with complaints of three-month history of patchy hair loss on the scalp, predominantly affecting the crown and temporal regions. The lesions are well-defined, round, and non-erythematous, with some areas exhibiting complete baldness. The hair in the affected regions appears thinner, brittle, and dry in texture. Notably, the hair loss is non-painful and non-itchy. Additionally, the patient reports digestive issues such as bloating and indigestion, particularly postprandial, and experiences fatigue and cold sensitivity, especially in the feet, exacerbated by work-related stress.

### Gynecological History

Menarche: at the age of 12 year

Regular cycle 6 days

30-32 days

Moderate to heavy during periods, with occasional discomfort, though no significant menstrual disorders.

### Physical Generals:-

**Appetite:** Adequate, sometime skipped meal duty busy schedule

**Stool:** irregular bowel movement pattern (sometimes constipated, sometimes loose).

**Urine:** 5-4 times/day, sometimes burning

**Perspiration:** More on excretion

**Sleep:** restless sleep, especially when she is under stress, feeling mentally exhausted

**Thermal:** Hot

### Mental Generals:-

She has always had low confidence, and the hair loss has worsened her feelings of insecurity and self-consciousness. She often feels she is not good enough in both her personal and professional life. She is a perfectionist and tends to set very high standards for herself. She gets frustrated if things do not go according to plan, which causes mental stress. She is particularly sensitive to criticism and has a deep fear of rejection. This is likely affecting her relationships and work performance. She is reserved and prefers to keep her emotions to herself, often retreating inwardly when stressed. She finds it difficult to express her emotions freely, even to close

friends. She tends to feel anxious, especially when faced with new challenges or when things do not go as planned. This anxiety often manifests in constant worry and overthinking

**Physical Examination:-**

**General Appearance:** Average build, slightly underweight

**Regional Examination:**

Location of affection: SCALP crown, temple

Number of patches: ONE

Size: coin size

Dandruff: No

Scales: No

Hair: Dry, thinner with no pain or itching

**Totality of symptoms:**

Low Self-Esteem

Perfectionism

Fear of Rejection

Introversion

Anxiety

Irregular bowel movement pattern

Restless sleep

Hot

Patchy hair loss

Fatigued and mentally drained < work, stress

Cold sensitivity esp. foot

➤ **Reportorial Totality:**

MIND		
1 MIND - AILMENTS FROM -		✕
rejected; from being		
2 MIND - CONFIDENCE -		✕
want of self-confidence		
3 MIND -		✕
CONSCIENTIOUS about trifles		
4 MIND - RESERVED		✕
HEAD		
5 HEAD - HAIR - brittle		✕
6 HEAD - HAIR - falling		✕
STOMACH		
7 STOMACH - INDIGESTION		✕
ABDOMEN		
8 ABDOMEN - DISTENSION - eating -		✕
agg.		
RECTUM		
9 RECTUM - DIARRHEA - alternating v		✕
constipation		

SLEEP				
10 SLEEP - RESTLESS				✕
GENERALS				
11 GENERALS - WEARINESS				✕
Remedies	ΣSym	ΣDeg	Symptoms	
lyc.	11	27	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	
sulph.	10	24	1, 2, 3, 4, 6, 7, 8, 9, 10, 11	
nat-m.	10	22	1, 2, 3, 4, 6, 7, 8, 9, 10, 11	
graph.	10	19	2, 3, 4, 5, 6, 7, 8, 9, 10, 11	
sep.	10	19	1, 2, 3, 4, 6, 7, 8, 9, 10, 11	
ars.	10	18	2, 3, 4, 5, 6, 7, 8, 9, 10, 11	
thuj.	10	16	1, 2, 3, 4, 5, 6, 7, 8, 10, 11	
plb.	10	13	2, 3, 4, 5, 6, 7, 8, 9, 10, 11	
puls.	9	22	2, 3, 4, 6, 7, 8, 9, 10, 11	
sil.	9	21	1, 2, 3, 4, 6, 7, 8, 10, 11	

### Selection of Medicine with reason:

She shows classic signs of Lycopodium, especially with her perfectionism, low self-esteem, and fear of failure. She often feels insecure, despite outward success, and is deeply anxious about being judged or criticized. People needing Lycopodium often have a deep-rooted fear of rejection and failure, even though they present as confident or capable on the surface. She has on-going digestive disturbances (bloating, constipation, and irregular bowel movements), which are common with Lycopodium. She feels mentally drained after work and struggles to find energy, another typical symptom of Lycopodium. Lycopodium is helpful in cases where hair loss is triggered by emotional stress, anxiety, and a sense of insecurity.

### Prescription:

Rx

LYCOPodium CLAVATUM 200 X 3 doses X OD x 3days X Oral

SAC LAC X 4pills x TDS x 7 days X Oral

**Follow up:**

<b>No. of follow-up</b>	<b>Change in Symptomatology</b>	<b>Further Advice (regarding prescription, general management, investigation etc.)</b>
1	Feeling of well being No hair regrowth No improvement in digestive complaints	Rx SAC LAC X 4pills x TDS x 7 days X Oral
2	Mild Relief in digestive complaint Cold feeling of feet decreased No hair regrowth	Rx SAC LAC X 4pills x TDS x 7 days X Oral
3	Dryness of hair No control in Hair fall	Rx SAC LAC X 4pills x TDS x 7 days X Oral
4	Digestive complaint slightly improved Reduced hair fall	Rx SAC LAC X 4pills x TDS x 7 days X Oral
5	Hair fall reduced Digestive disturbance as it is	Rx SAC LAC X 4pills x TDS x 7 days X Oral
6	Hair falling reduced Sound sleep Sometimes bloated feeling after eating	Rx SAC LAC X 4pills x TDS x 7 days X Oral
7	Quite better	Rx SAC LAC X 4pills x TDS x 7 days X Oral

**Before****After**

#### Case 4

A female patient of 34 years age residing at Vyara, Gujarat presented with complaints of a 2-month history of patchy hair loss localized to the temporal and crown regions of the scalp. The affected areas are well-defined and round, with associated thinning of the surrounding hair. Notably, there is no associated itching, burning, or pain. The patient reports increased self-consciousness and stress related to the change in appearance. Additionally, she experiences irregular menstrual cycles characterized by occasional skipped periods and episodes of heavy bleeding. Lower back aching pain is noted, particularly during menstruation.

#### Gynecological History

Irregularity in her periods, sometimes skipping cycles and experiencing heavy bleeding when they do occur. Mood swings and Mild aching pain in the lower back, especially during her menstrual cycle.

History of PCOD, may be due to hormonal imbalance

#### Physical Generals:-

**Desire:** Sugary things

**Sleep:** un-restful and fragmented. She often wakes up in the middle of the night feeling mentally agitated and finds it hard to fall back asleep.

**Thermal:** Chilly

#### Mental Generals:-

She feels emotionally overwhelmed by the demands of her career, family life, and motherhood. She feels like she is running on empty and has little time or energy for herself. She tends to feel irritable and frustrated over small things, particularly when she feels unappreciated at home or work. She harbours deep feelings of resentment towards her responsibilities, particularly regarding her role as a mother and the lack of help from her husband. She feels taken for granted and emotionally drained by the constant demands on her time and energy. She feels detached from her relationships, particularly her husband, and has little emotional connection with him. There is also a lack of interest in sexual intimacy. She has bouts of sadness and feels lonely, despite being surrounded by family. She feels unsupported and isolated in her daily life. Often, she feels weepy and vulnerable, especially during stressful moments, but she tries to hide it and put on a brave face.

#### Physical Examination:-

**General Appearance:** Healthy

#### Regional Examination:

**Hair Loss:** The patches are well-defined, with no visible irritation, just gradual thinning.



Dry and Brittle Hair: Her hair has become dry and fragile, breaking easily.

Location: crown and temples

### **Totality of symptoms:**

Emotional Exhaustion

Irritability

Feelings of Resentment

Indifference

Sadness and Loneliness

Weepy and Vulnerable

Chilly

Difficulty in falling asleep

Irregular menstruation

Backache < during menses

Hair Falling

### ➤ **Reportorial Totality:**

MIND	
1 MIND - HATRED	✕
2 MIND - INDIFFERENCE - loved ones, to	✕
3 MIND - INDIFFERENCE - sex; to opposite	✕
4 MIND - IRRITABILITY	✕
5 MIND - SADNESS	✕
6 MIND - WEEPING	✕
HEAD	
7 HEAD - HAIR - falling	✕
FEMALE GENITALIA/SEX	
8 FEMALE GENITALIA/SEX - MENSES irregular	✕
BACK	
9 BACK - PAIN - menses - during - agg.	✕

SLEEP			
10 SLEEP - WAKING - difficult			✕
Remedies	ΣSym	ΣDeg	Symptoms
sep.	10	24	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
phos.	9	18	1, 2, 4, 5, 6, 7, 8, 9, 10
sulph.	8	21	1, 4, 5, 6, 7, 8, 9, 10
calc.	8	19	1, 4, 5, 6, 7, 8, 9, 10
nit-ac.	8	19	1, 4, 5, 6, 7, 8, 9, 10
lyc.	8	18	1, 4, 5, 6, 7, 8, 9, 10
caust.	8	17	1, 4, 5, 6, 7, 8, 9, 10
plat.	8	16	1, 2, 4, 5, 6, 7, 8, 9
puls.	8	16	1, 3, 4, 5, 6, 7, 8, 9
thuj.	8	15	3, 4, 5, 6, 7, 8, 9, 10
bell.	8	14	2, 4, 5, 6, 7, 8, 9, 10
nat-c.	8	13	1, 4, 5, 6, 7, 8, 9, 10

**Selection of Medicine with reason:**

Sepia is the remedy for individuals who feel overwhelmed by their responsibilities and have a deep sense of resentment and emotional depletion. This often happens in women who are juggling family, work, and personal life. People needing Sepia often experience emotional detachment and a lack of interest in their relationships, especially in sexual intimacy, which matches with her symptoms. Sepia individuals are prone to irritability, especially when their emotional needs are not being met, and can have periods of deep sadness and loneliness. The alopecia in her case may be related to on-going emotional stress and mental exhaustion, which is a classic trigger for Sepia. Sepia also works well for women with hormonal imbalances, such as irregular periods and lower back pain around menstruation, as seen in her.

**Prescription:**

Rx

SEPIA 200 X 3 doses X OD X 3days X Oral

SAC LAC X 4pills X TDS X 7 days X Oral

**Follow up:**

No of follow-up	Change in Symptomatology	Further Advice (regarding prescription, general management, investigation etc.)
1	Feeling of well being No hair regrowth	Rx SAC LAC X 4pills X TDS X 7 days X Oral
2	No hair regrowth Sleep Improved	Rx SAC LAC X 4pills X TDS X 7 days X Oral
3	Dryness of hair decreased Tiny hair growth seen in bald patch area	Rx SAC LAC X 4pills X TDS X 7 days X Oral
4	Hair become moisture Mental behaviour improved	Rx SAC LAC X 4pills X TDS X 7 days X Oral
5	Hair become moisture Better in digestive disturbance	Rx SAC LAC X 4pills X TDS X 7 days X Oral
6	No further hair loss complaint	Rx SAC LAC X 4pills X TDS X 7 days X Oral

## Case 5

A male patient of 35 years age residing at Vyara, Gujarat presented with complaints of 3-month history of patchy hair loss on the scalp, particularly affecting the crown and temporal regions. The affected areas are well-defined and circular, with associated dryness of the scalp; however, there is no associated itching, burning, or pain. The patient also reports rashes on both forearms characterized by severe itching, exacerbated by heat and perspiration, and alleviated by the application of moisturizer. Despite a 1.5-month course of allopathic treatment, there has been no significant improvement, and the hair loss has worsened over the past 15 days.

### Physical Generals:-

**Desire:** sweet<sup>+++</sup>

**Stool:** sometimes constipated, require straining

**Urine:** pale yellow color, no burning

**Perspiration:** more on scalp and head

**Thermal:** Chilly

### Mental Generals:-

Stress and Anxiety

Suppressed Emotions

Feels insecure and excessively concerned about the patches of hair loss on his head.

Short-tempered and easily irritated, especially when feeling overwhelmed or under pressure.

Withdrawn in social situations; doesn't express himself openly and keeps his feelings to himself.

Overthinking, difficulty relaxing, constant worrying

### Physical Examination:-

**General Appearance:** Anxious

### Regional Examination:

Location of affection: Scalp

Size: 1<sup>1/2</sup> inch

Number of patches: One

Dandruff: No

Scales: No

Hair: Dry

**Totality of symptoms:**

Anxiety about health

Fear of losing control

Insecurity about future

Prostration but doing work

Desire for sweet

Stool passing required much straining

Chilly

Patchy hair, Circular patches

Dry scalp with no itching

Hair fall&lt; combing and washing of hair

Rashes on both forearm with severe itching &lt;heat and perspiration

&gt;Application of moisturizer

**Reportorial Totality:**

MIND			
1 MIND - ANXIETY			✕
2 MIND - FEAR - control; losing			✕
3 MIND - FEAR - health			✕
4 MIND - INSECURITY; mental			✕
5 MIND - PROSTRATION of mind			✕
HEAD			
6 HEAD - HAIR - brittle			✕
7 HEAD - HAIR - bunching of hair			✕
RECTUM			
8 RECTUM - CONSTIPATION - accom			✕
straining			
EXTREMITIES			
9 EXTREMITIES - ERUPTIONS - Forea			✕
rash			

SKIN			
10 SKIN - ERUPTIONS - itching			✕
11 SKIN - ITCHING - heat			✕
12 SKIN - ITCHING - perspiration -			✕
agg.			
GENERALS			
13 GENERALS - FOOD and DRINKS - s			✕
desire			
Remedies	ΣSym	ΣDeg	Symptoms
ars.	8	15	1, 2, 3, 4, 5, 6, 10, 13
lyc.	7	14	1, 2, 5, 6, 10, 12, 13
merc.	7	11	1, 3, 5, 9, 10, 12, 13
staph.	7	11	1, 3, 4, 5, 6, 10, 13
bry.	6	12	1, 4, 5, 9, 10, 13
sep.	6	12	1, 5, 8, 10, 12, 13
calc.	6	11	1, 2, 3, 5, 10, 13
kali-s.	6	11	1, 2, 4, 5, 10, 13
nat-m.	6	10	1, 5, 8, 10, 12,

**Selection of Medicine with reason:**

Mental/Emotional Profile: Anxiety, restlessness, insecurity, and fears about health and appearance. He is highly anxious, with a tendency to be over-concerned about minor issues (like hair loss) and worried about the future.

Behavioural Patterns: Tends to bottle up emotions, feel insecure, and may exhibit irritability under pressure. Arsenicum is often recommended for individuals who feel a lack of control and seek perfection in their appearance.

Physical Symptoms: Dry, brittle hair, hair falling in patches, and skin issues, which correspond to Arsenicum's characteristics of dryness and fragility.

General State: Weakness, fatigue, and an overall sense of being unwell but desire to remain active despite exhaustion

**Prescription:**

Rx

ARSENICUM ALBUM 200 X 1 Dose X OD X Oral

SAC LAC X 4pills X TDS X 7 days X Oral

**Follow up:**

No of follow-up	Change in Symptomatology	Further Advice (regarding prescription, general management, investigation etc.)
1	Hair falling complaint as it, no reduction in hair falling	Rx SAC LAC X 4pills X TDS X 7 days X Oral
2	Hair falling complaint as it, no reduction in hair falling Skin rashes decrease (supportive treatment for hair fall)	Rx KALI SULPH 6x X 4 TAB X TDS X 7 Days X Oral SAC LAC X 4pills X TDS X 7 days X Oral
3	Reduced hair falling	Rx SAC LAC X 4pills X TDS X 7 days X Oral
4	Quite better	Rx SAC LAC X 4pills X TDS X 7 days X Oral

**Before****A**

**Modified Naranjo criteria for assessing casual attribution of clinical outcome to homoeopathic intervention.**

Sr. No.	Criteria	YES	NO	Not Sure/ Not Applicable	Case 01	Case 02	Case 03	Case 04	Case 05
1	Was there an improvement in the main symptom or condition for which the homoeopathic medicine prescribed?	2	1	0	2	2	2	2	2
2	Did the clinical improvement occur within a plausible time frame relative to the drug intake?	1	2	0	1	1	1	1	1
3	Was there an initial aggravation of symptoms?	1	0	0	0	0	0	0	0
4	Did the effect encompass more than the main symptom or condition, that is, were other symptoms ultimately improved or changed?	1	0	0	1	1	1	1	1
5	Did overall well-being improve?	1	0	0	1	1	1	1	1
6	(A) Direction of cure: did some symptoms improve in the	1	0	0	1	1	1	1	1

	opposite order of the development of symptoms of the disease?							
	(B) Direction of cure: did at least two of the following aspects apply to the order of improvement of symptoms: from organs of more importance to those of less importance, from deeper to more superficial aspects of the individual, from the top downwards.	1	0	0	1	1	1	1
7	Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporary during the course of improvement?	1	0	0	0	0	0	0
8	Are there alternate causes (other than the medicine) that with a high probability could have caused the improvement? (consider known course of disease, other forms of treatment and other clinically relevant interventions)	-3	1	0	-2	-1	0	-2
9	Was the health improvement confirmed by any objective evidence? (Clinical examination)	2	0	0	2	2	2	2
10	Did repeat dosing, if conducted, create similar clinical improvement?	1	0	0	1	1	1	1
<b>TOTAL</b>					<b>8</b>	<b>9</b>	<b>10</b>	<b>8</b>
<b>Result: Improved/ Not improved</b>					<b>Imp rov ed</b>	<b>Imp rov ed</b>	<b>Imp rov ed</b>	<b>Imp rov ed</b>

Criteria of Assessment of Improvement in Case he Modified Naranjo Criteria for homeopathy (MONARCH): Improved: 8 to 13 Marks, Not Improved: -6 to 8 Marks